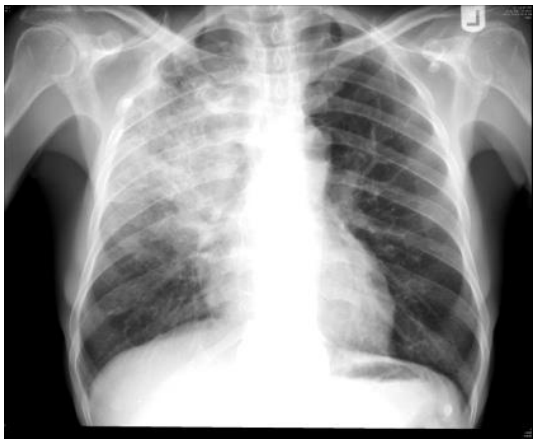
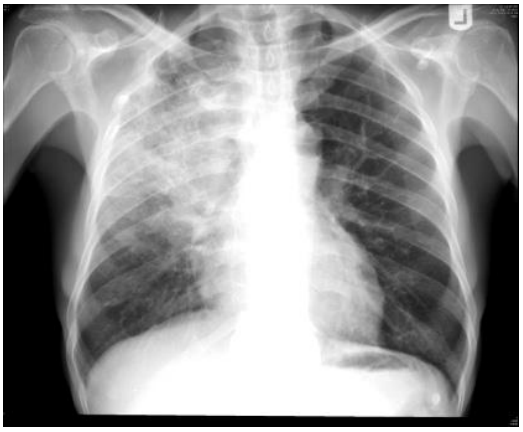
MCPS-MRCGP International Course-2019 Session
Mandatory Pre Session Assignment – Pulmonology

1. You see an 80 year old woman in the emergency department. Her daughter says that she has been confused (which is new for her) and "off legs" for two days. She has had a cough. She is known to have chronic obstructive pulmonary disease and angina. Examination reveals a respiratory rate of 28/minute and right sided crackles. A chest x ray shows shadowing in the right lower zone. What is the single most appropriate management step?
   A. Oral antibiotics at home
   B. Admission in hospital
   C. IV antibiotics at home
   D. Antibiotics and nebulizer at home

2. A 50 year old man presents with a dry cough and fever for last 4 days. He looks restless and short of breath. He has a respiratory rate of 26 and a blood pressure of 100/70. His chest examination revealed dullness to percussion on the right side. There is decreased air entry on the right side and right sided crackles. His X-ray is given below. Which is the most appropriate antibiotic(s) according to WHO guidelines?
   A. Amoxicillin + Doxycycline
   B. Clarithromycin + Ceftriaxone
   C. Co-Amoxiclave + Doxycycline
   D. Levofloxacin
   E. Moxifloxacin



3. A 50 year old man presents with a dry cough and fever for last 4 days. He looks comfortable. He has a respiratory rate of 18 and a blood pressure of 130/80. His chest examination revealed dullness to percussion on the right side. There is decreased air entry on the right side and right sided crackles. His X-ray is given below. Which is the single most appropriate antibiotic in this case according to WHO guidelines?
   A. Amoxicillin
   B. Clarithromycin
   C. Co-Amoxiclave
   D. Doxycycline
   E. Moxifloxacin



4. A patient with chronic obstructive pulmonary disease is presents with fever, increased cough and sputum production. His respiratory rate is 20 / min, BP is 120/78 mm Hg. On examination he has bilateral rhonchi and crepts. What is the single most appropriate antibiotic for his condition at this stage according to WHO guidelines?
   A. Clarithromycin
   B. Co-Amoxiclave
   C. Cotrimaxazole
   D. Doxycycline
   E. Moxifloxacin

5. A 45 years chronic smoker presents to your clinic with cough, hemoptysis and shortness of breath for the last 3 months. His chest X-ray shows;
What is the most likely diagnosis?

   A. Atypical pneumonia
   B. Bronchogenic carcinoma
   C. Lobar Pneumonia
   D. Pulmonary edema
   E. Pulmonary fibrosis

6. A 30 year old man is admitted with a dry cough and shortness of breath. His chest x ray is normal. His is very hypoxic. Bronchoalveolar lavage shows *Pneumocystis carinii* pneumonia. What treatment would you recommend?
   A. Cefotaxime
   B. Clarithromycin
   C. Cotrimoxazole
   D. Doxycycline
   E. Levofloxaxcin

7. A 28 years old pregnant woman presents to you with 8 days history of cough, shortness of breath, fever and diarrhea. There is bilateral harsh breathing and bilateral rhonchi are present on auscultation. What would you like to prescribe to her at this stage based on etiology of organisms in her case?
   A. Amoxicillin
   B. Ciprofloxacin
   C. Cotrimoxazole
   D. Doxycycline
   E. Erythromycin

8. A 66 year old woman presents with fever, dry cough, abdominal pain, nausea and shortness of breath for one week. She has just returned from holiday in Thailand where she dwelled in an economical hotel. On examination she is afebrile and has bilateral rhonchi and crepts. What is the recommended duration of antibiotic therapy for her condition?
   A. 10 days
   B. 14 days
   C. 21 days
   D. 28 days
   E. 7 days

10. The fundamental pathological process occurring in asthma is:
   A. Broncho-constriction
   B. Increased susceptibility to respiratory viral infections
   C. Inflammation of the airways
   D. Increased sensitivity to triggers such as air pollution or aeroallergens
   E. Mucus production leading to narrowed airways

11. A 30 year old man comes to your clinic as he is having an asthma attack. His pulse is 100 BPM and BP is 110/80 mmHg. He has a bad cough and on examination he is wheezy. His peak expiratory flow rate is 60% of his best. How would you grade the severity of the asthma attack?
    A. Life-threatening
    B. Mild
    C. Moderate
    D. Severe

12. A 20 years old boy presents with episodic cough and shortness of breath for the last two years. His cough is more at early morning and during exercise. He does not have fever or weight loss. What is the single most appropriate diagnostic test at this stage?
    A. CBE & ESR
    B. Chest X-ray
    C. Skin allergy testing
    D. Spirometry
    E. Sputum AFB smear

13. An 18 year old man attends your clinic with intermittent shortness of breath whenever he exercises. His examination in your clinic is normal. His spirometry shows more than 30 % variability with Bronchodilator. What is the single most appropriate initial drug for his condition?
    A. Beclomethasone
    B. Montelukast
    C. Salbutamol
    D. Salmeterol
    E. Tiotropium

14. A 20 year old asthmatic woman comes to your clinic complaining of sudden increase in her cough, shortness of breath and also new onset left-sided chest pain. On examination there is good air entry over the right side of her chest but breath sounds are reduced over the left side. Left side of chest is hyper resonant. Tactile fremitus is also decreased over the left side. What is the most likely diagnosis?
    A. Pleural effusion
    B. Pneumonia
    C. Pneumothorax
    D. Pulmonary embolism
    E. Severe asthma

15. A 50 year old smoker comes to see you because he has had a cough for the last eight weeks and his weight has fallen by 5 kg. He is concerned as he notices streaks of blood in his sputum recently. What is the most likely appropriate initial investigation in primary care set up?
    A. Bronchoscopy
    B. Chest X-ray
    C. HRCT chest
    D. Spirometry
    E. Sputum AFB

16. A 28 years old man presents with a six week history of a hoarse voice, weight loss, and malaise. He also has night sweats. What is the most likely diagnosis?
    A. Acute laryngitis
    B. Hypothyroidism

C. Laryngeal polyp
D. Laryngeal tuberculosis
E. Primary tuberculosis

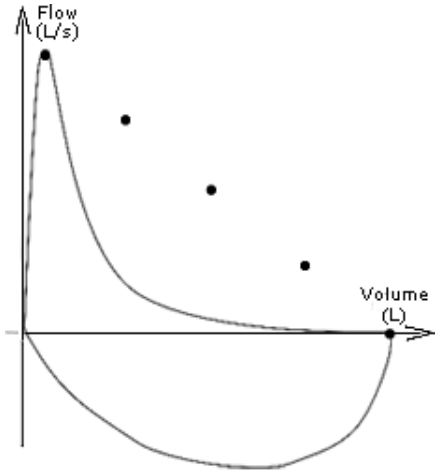
18. A 19 years old boy has brought by his father to your clinic for evaluation. The boy complains of cough and shortness of breath off and on since 6 months. His father wants you to confirm the diagnosis of asthma as many of his cousins are also suffering from asthma. You advised spirometry which shows:

FEV1 = ↓↓
FVC = ↓
FEV1/FVC = 0.3 (0.75 to 0.80)
What does the patient have?

A. Asthma
B. Reactive airway disease
C. Interstitial lung disease
D. Normal pulmonary functions
E. Restrictive lung disease

A 37 years old housewife comes to your clinic with mild shortness of breath during exercise. Her pulse=82/min, BP=110/70, RR=24/min.

She does not smoke. His spirometry shows;
What is the single most appropriate diagnosis?



A. Asthma
B. COPD
C. Lung Fibrosis
D. Non pulmonary cause
E. Upper airway obstruction

20. A 24 years old male presents with 10 days history of 103° fever, cough and right sided chest pain. X-ray shows right sided pleural effusion. Pleural fluid aspirate shows:

Proteins: 45 g/L
WBC: 20 x 10 per liter
Neutrophils: 80 %
Lymphocytes: 18 %

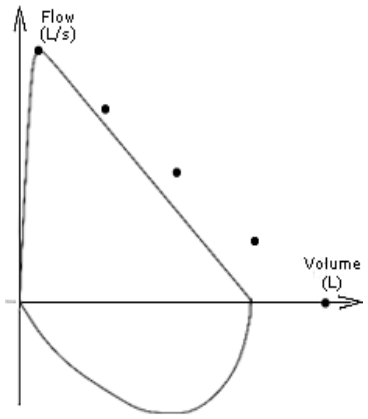
What is the most appropriate diagnosis?

A. Atypical pneumonia
B. Pulmonary embolism
C. Tuberculous effusion
D. **Typical pneumonia**
E. Viral pneumonia

21. A 45 years old obese woman presents with sudden onset of shortness of breath which started during sitting in the waiting area. Her BP is 100/70 mm Hg, RR is 24 / min and chest examination is normal. Her chest X-ray done is reported normal. What is the single most appropriate treatment option for her condition?

A. Bromazepam
B. Low molecular weight Heparin
C. Re-breathing bag
D. Salbutamol nebulizer
E. Sublingual Nitrates

22. A 37 years old housewife comes to your clinic with mild shortness of breath during exercise. She does not smoke. His spirometry shows; Her pulse=82/min, BP=110/70, RR=24/min.



What is the single most appropriate diagnosis?

A. Bronchial Asthma
B. Chronic Obstructive Pulmonary Disease
C. Pulmonary Hypertension
D. Restrictive Lung Disease
E. Upper airway obstruction

23. A 55 years old man presents with cough mostly at night since last one year. He often wakes up from sleep with cough and feeling of suffocation. He is a banker and works till late night. He reports weight gain and bad taste in his mouth. His weight is 104 KG and rest of examination is normal. He has used Salmeterol inhaler but with little avail. What is the single most likely diagnosis in his case?
A. Adult Onset Asthma
B. Chronic Obstructive Lung Disease
C. Gastro Esophageal Reflux
D. Ischemic Health Disease
E. Pulmonary Hypertension

24. A 52 years Hypertensive patient presents with shortness of breath since last one year mostly during his brisk walk as advised by his doctor. He denies chest pain and sweating. He is taking tablet Amlodipine 5 mg since last 10 years. His BP is 160/100 mm Hg, pulse is 88 / min, apex beat is bounding and there are bilateral rhonchi. What is the single most appropriate diagnosis?
A. Ischemic heart Disease
B. Left Ventricular Failure
C. Pulmonary Hypertension
D. Right Ventricular Failure
E. Valvular Heart Disease

25. A 55 years woman presents with chest pain, shortness of breath and hemoptysis. Her Chest X-ray shows;
What is the single most likely diagnosis?

A. Bronchoalveolar carcinoma
B. Bronchopneumonia
C. Bronchopulmonary Aspergilosis
D. Pneumocystis carinii infection
E. Pulmonary metastasis

26. A 43 years old man presents with chronic productive cough since last five years. Five years ago had pulmonary TB which was treated successfully with 6 months of ATT. His sputum is more in the morning and he feels awkward spitting sputum many times in a day. What is the single most appropriate long term management step for his condition?
    - **A. Chest physiotherapy**
    - B. Long term antibiotic prophylaxis
    - C. Mucolytic syrups or tablets
    - D. Syrup Dextromethphan
    - E. Tiotropium inhaler

27. A 45 year old asthmatic man on 1600 ug of Beclomethasone daily and Salbutamol inhaler four times a day presents with a cough productive of mucoid sputum and shortness of breath on minimal exertion. His peak flow is 50 % of the patient's best value. What is the most appropriate immediate management?
    - A. Ipratropium
    - B. Montelukast
    - C. Prednisolone
    - **D. Salmeterol**
    - E. Theophylline

28. A 22 year old non-smoker student presents with cough for eight months which is mostly at night. There is no fever, weight loss, shortness of breath. His physical examination and chest x-ray are normal. What is the most likely diagnosis?
    - A. Allergic bronchitis
    - B. Bronchial asthma
    - C. Chronic obstructive pulmonary disease
    - **D. Cough variant asthma**
    - E. Loffler's syndrome

29. A 40 year old man came to emergency with breathlessness, wheezing. He is unable to complete sentences without break. His B.P is 130/96, pulse is 120/min, R/R 30/min, PEFR is 50% of his previous best. What is the stage of Asthma?
    - A. Brittle asthma
    - B. Life threatening asthma
    - C. Mild asthma
    - D. Moderate asthma
    - **E. Severe asthma**

30. A 25 year old patient comes to clinic with cough and wheezing on three days per week. He is taking 12 puffs/day of Salbutamol when he has cough and shortness of breath. What is the single most appropriate term to describe level of control of this patient?
    - A. Borderline control
    - B. Mildly control
    - C. Moderately control
    - **D. Poorly control**
    - E. Totally uncontrolled

Musculoskeletal

Post Session

MCPS-MRCGP CourseMusculoskeletal

1. A 60 year old male patient of multiple myeloma complains of severe body pains. He is taking Ibuprofen and Tramadol but without any relief. Which is the single most appropriate next step in reducing bone pains?
    a. **Bisphosphonate**
    b. Calcitonin
    c. Calcium Gluconate
    d. Dexamethasone
    e. Vitamin D
2. A 62 year old male patient of metastatic prostate cancer complains of severe body pains and shooting pain in both legs. He has difficulty in moving his left leg. He is taking Ibuprofen and Tramadol but without much relief. Which is the single most appropriate next step in relieving his leg symtoms?
    a. Bisphosphonate
    b. Calcitonin
    c. Calcium Gluconate
    d. Dexamethasone
    e. Vitamin D
3. A 62 years old woman presents with malaise, low mood, pain and stiffness of neck, shoulder & hip for last 3 months. She can't even get out of bed in the morning because of stiffness. Her physical examination shows stiffness and tenderness of trapezius muscle. Her Blood sugar is 101 mg/dl in fasting and TSH is 2.4 (0.4 to 4.0). Her ESR is 55 mm/hr. What would be the most likely diagnosis?
    a. Fibromyalgia
    b. Myofascial pain syndrome
    c. Polymyalgia Rheumatica
    d. Rheumatoid arthritis
    e. Temporal Arteritis
4. A 60 years old woman presents with malaise, low mood, pain and stiffness of neck, shoulder & hip for last 3 months. She can't even get out of bed in the morning because of stiffness. She complains of pain in jaw muscles during meals. Since last one days she is complaining of blurring of vision in right eye. Her physical examination is normal. Her Blood sugar is 101 mg/dl in fasting and TSH is 2.4 (0.4 to 4.0). Her ESR is 55 mm/hr. What would be the most likely diagnosis?
    a. Fibromyalgia
    b. Myofascial pain syndrome
    c. Polymyalgia Rheumatica
    d. Rheumatoid arthritis
    e. Temporal Arteritis
5. A 19 years old boy presents with pain & swelling of right elbow and left knee joint for last 1 week. He also has back ache. Three weeks ago he had diarrhea which has now settled. What is the most likely diagnosis?
    a. Bechet's syndrome
    b. Reactive arthritis
    c. Reiter's syndrome
    d. Rheumatic fever

e. Rheumatoid arthritis

6. A 36 years male presents with painful red eye, skin rash, burning micturition, backache and multiple joint pains for last 1 week. Three weeks ago he had diarrhea which has now settled. What is the most likely diagnosis?
    a. Bechet's syndrome
    b. Reactive arthritis
    c. Reiter's syndrome
    d. Rheumatic fever
    e. Rheumatoid arthritis
7. A 40 year old woman presents with aching all over her body for last 1 year. She also complains of headache, poor quality sleep and tingling in her hands. Her shoulder, back, neck, elbows and hips have painful areas which are tender to touch. What would be the most likely diagnosis?
    a. Chronic fatigue syndrome
    b. Fibromyalgia
    c. Masked Depression
    d. Multiple Myeloma
    e. Polymyalgia Rheumatica
8. A 35 years old patient presents with backache for last 4 months. She has used different medicines which relieve symptoms temporarily. Her sleep is disturbed and she has epigastric burning. Her X-rays of lumbosacral spine are normal. What would be the single best drug for her back problem?
    a. Amitriptyline
    b. Diazepam
    c. Escitalopram
    d. Gabapentin
    e. Tizanidine
9. A 15 years athlete presents with pain & swelling over the Tibial tubercles for last 20 days. On examination the Tibial tubercles are swollen, red and tender. What is the single most appropriate diagnosis?
    a. Growing pain
    b. Infrapatellar Bursitis
    c. Juvenile Rheumatoid arthritis
    d. **Osgood Schlatter disease**
    e. Perthe's disease
10. A 35 years old male runner presents with pain in lateral side of thigh which is worse during running. There is localized tenderness on entire lateral side of thigh. There is no sensory loss. What will be the most likely diagnosis?
    a. Avascular necrosis
    b. Duchene's muscular dystrophy
    c. **Fascia lata syndrome**
    d. Hip septic arthritis
    e. Trochnteric burisitis
11. A 32 years old female presents with severe pain in her heel for last 20 days. Pain is worse in first few steps in the morning or after prolonged sitting. What will be the most appropriate diagnosis?
    a. Achilles tendonitis
    b. Calcaneal Epiphysitis
    c. Hyperuricemia
    d. Morton's neuroma
    e. Planter fasciitis

12. A 50 year old woman is concerned that she may develop osteoporosis, as her mother got fracture of hip joint when she was of 60 years. Patient BM1 is 15 KG/M2. She is still menstruating regularly. What would be the most appropriate next step in the *diagnosis* of osteoporosis?
    a. Bone Mineral Density
    b. Alkaline phosphatase
    c. Serum Calcium
    d. Vitamin D levels
    e. X-ray Lumbosacral spine
13. A 50 year old woman is concerned that she may develop osteoporosis, as her mother got fracture of hip joint when she was of 60 years. Patient BM1 is 15 KG/M2. She is still menstruating regularly. Her screening tests only show T-score of -2.4 SD. What would be the most appropriate next step at this stage?
    a. Alendronate
    b. Calcitonin
    c. Calcium &Vit D
    d. Low dose HRT
    e. Raloxifen
14. A 50 years old patient presents with unilateral throbbing headache, facial pain & scalp tenderness while combing for last 1 week. She also reports generalized body aches, stiffness of back muscles and low mood. What is the single most appropriate initial test to diagnose the condition in general practice?
    a. Biopsy
    b. CT brain
    c. ESR
    d. MRI brain
    e. X-ray skull
15. A 50 year old female has been on long-term steroids for chronic obstructive pulmonary disease. She complains of pain in her right groin radiating down the anteromedial thigh. She has an abnormal gait. There is decreased range of movement especially flexion, abduction and internal rotation of right hip. What is the most likely diagnosis?
    a. **Avascular necrosis**
    b. Osteoarthritis
    c. Osteoporosis
    d. Pseudo claudication
    e. Rheumatoid arthritis
16. A 38 years old female comes with Dexa Scan report showing T score of – 1.0.SD. Her BM1 is 20 Kg/M^2. She is not doing any exercise. She had menopause because of pelvic surgery which is confirmed with very high FSH levels. What would be single most appropriate step?
    a. Alendronate
    b. Calcitonin
    c. Low dose HRT
    d. Raloxifen
    e. Strontium
17. A 30 years old female presents with hair loss, urticaria & rash on the face, nose and forehead and also pain in wrists and elbow joints for the last 2 months. Lab tests show; Hemoglobin; 9.0 g/dl, platelets 120,000 & protein++ in urine. What would be the most likely diagnosis?
    a. Antiphospholipid syndrome
    b. Ig A nephropathy
    c. Nephrotic syndrome
    d. Systemic lupus erythematosus
    e. Systemic Sclerosis

18. A 25 years old female presents with pain in knee, elbow, wrist joint, hair loss, urticaria and photosensitivity for last 2 months. Lab reports show Hb 8.5 g/dl platelets 110000 – (150000 – 450000) & proteins in urine. Her BP is 160/100 mm/Hg. What would be the most appropriate *initial* diagnostic test?
    a. Antinuclear Antibodies
    b. Bone marrow biopsy
    c. Anti-Double-stranded DNA
    d. Hb Electrophoresis
    e. Ultrasound abdomen
19. A 28 year old person has an accident of his car 3 days ago. At that time he was normal except a mild pain in his neck. After three days he suddenly developed severe neck pain which radiates to arms and neck movements are decreased. What is the single most appropriate diagnosis?
    a. Cervical disc prolapse
    b. Cervical spondylosis
    c. Cervical subluxation
    d. Spasmodic torticollis
    e. Whiplash neck injury
20. A 55 year old diabetic patient presents with painful shoulder and limitation of movements. He can't comb his hair. Pain is more at night. What is the single most likely diagnosis?
    a. Adhesive capsulitis
    b. Osteoarthritis of shoulder
    c. Polymyalgia rheumatica
    d. Rotator cuff injury
    e. Shoulder dislocation
21. A 28 year old badminton player presents with pain in his elbow while playing for last 1 week. There is pain on resisted wrist extension. What is the most likely diagnosis?
    a. Dislocated elbow
    b. Golfer elbow
    c. Olecranon Bursitis
    d. **Tennis elbow**
    e. Ulnar neuritis
22. A 24 year old asthmatic patient presents with severe hip pain & he is unable to walk. He has been on oral steroids for the last five months. What is the single most *specific* test to diagnosis this condition?
    a. Aspiration
    b. CT scan
    c. ESR
    d. **MRI**
    e. X-ray
23. A 22 years old footballer is hit on lateral side of knee during a match. He complains of severe pain & swelling over medial side of knee. Which ligament is most likely to be injured?
    a. Lateral collateral
    b. Lateral meniscus
    c. **Medial collateral**
    d. Medial meniscus
    e. Patellar tendon
24. A 65 years old woman presents with acute pain at lateral side of upper thigh. She has osteoarthritis in both knees & hips. There is tenderness and swelling on lateral side of hip joint. What will be the most likely diagnosis?
    a. Avascular necrosis
    b. Fascia lata syndrome

c. Pathological fracture
d. Septic arthritis
e. Trochanteric bursitis

25. A mother brings her 5 year old child with complains of waking up at night because of leg pain. He is fine in day time. What will be the most likely diagnosis?
    a. Chondromalacia patellae
    b. Growing pain
    c. Juvenile rheumatoid arthritis
    d. Osgood schlatter disease
    e. Restless leg syndrome
26. A 38 year housewife presents with knee pain & swelling over the knee joint while doing her job for last 2 months. There is mildly tender swelling right over the patella. What will be the most likely diagnosis?
    a. Prepatellar bursitis
    b. Chondromalacia patellae
    c. Infrapatellar Bursitis
    d. Osgood Schlatter disease
    e. Suprapatellar bursitis

MCPS-MRCGP Course post session ENDO

1. A 35 years old woman brings her laboratory investigations which were done as part of pre-employment checkup for her new job. She denies any symptoms. TSH is 11 mu/L (0.4 --- 4.5 mu/L), FT4 11.5 pmol/L (9.0-----25 pmol/L). What is the single most appropriate target of her treatment?
    a. Clinical improvement
    b. Normalize T3
    c. Normalize T4
    d. Normalize TSH
2. A 32 years old woman brings her laboratory investigations which were done as part of pre-employment checkup for her new job. She denies any symptoms. Her TSH is 11 mu/L (0.4 --- 4.5 mu/L), FT4 14.2 pmol/L (9.0-25 pmol/L) is within normal limits. What is the single most appropriate starting dose of Thyroxin?
    a. 12.5 microgram
    b. 25 microgram
    c. 50 microgram
    d. 75 microgram
    e. 100 microgram
3. A 35 years old woman was admitted in the hospital for treatment of infected burns of 20 % of her body. Her lab done during the admission show TSH of 0. 09 mu/L (0.4 --- 4.5 mu/L), FT4 28.2 pmol/L (9.0-----25 pmol/L). What is the single most appropriate step in management?
    a. Levothyroxin
    b. Methimazole
    c. Prednisolone
    d. Propylthiouracil
    e. Watchful waiting
4. A 43 year old woman presents with a very tender goiter, fever, redness of neck, since two days. She is conscious and nervous. Her pulse is 130 BPM, PB is 140/60 mm Hg and there are fine tremors in hands. Thyroid function test show;
   TSH <0.05 mU/l (0.4 --- 4.5 mu/L)
   Free T4 37.7 pmol/l(9.0-----25 pmol/L)
   What is the most likely diagnosis?
    a. Acute thyroiditis
    b. Hashimoto's thyroiditis
    c. Sub acute thyroiditis
    d. Subclinical hypothyroidism
    e. Thyroid storm
5. A 43 year old woman presents with a very tender goiter, fever, redness of neck, since two days. She is conscious and nervous. Her pulse is 130 BPM, PB is 140/60 mm Hg and there are fine tremors in hands. Thyroid function test show;
   TSH <0.05 mU/l (0.4 --- 4.5 mu/L)
   Free T4 37.7 pmol/l(9.0-----25 pmol/L)
   What is the most specific treatment for this condition in addition to symptomatic treatment?
    a. Co-amoxiclave

b. Methimazole
c. Prednisolone
d. Propylthiouracil
e. Radioactive iodine

6. A 43 year old woman presents with a very tender goiter, fever, redness of neck, since two days. She is drowsy, agitated and nervous. Her Temperature is 105° F, pulse is 140 BPM, PB is 180/90 mm Hg and there are tremors in hands. Thyroid function test show;
   TSH <0.05 mU/l (0.4 --- 4.5 mu/L)
   Free T4 46.2 pmol/l(9.0-----25 pmol/L)
   What is the most likely diagnosis?
   a. Acute thyroiditis
   b. Hashimoto's thyroiditis
   c. Sub acute thyroiditis
   d. Subclinical hypothyroidism
   e. Thyroid storm
7. A 52 year old woman who was diagnosed as having primary atrophic hypothyroidism 12 months ago is reviewed following recent thyroid function tests (TFTs):
   TSH 1.9 mU/l (0.4 --- 4.5 mu/L), Free T4 19.8 pmol/l (9.0-----25 pmol/L)
   She is taking 75mcg of Levothyroxin once a day since last 6 months. Her pulse is 80 BPM and BP is 130/80 mm Hg.
   What is the single most appropriate management step to improve her condition?
   a. Change brand
   b. Continue same
   c. Decrease Thyroxin
   d. Increase Thyroxin
   e. Repeat TSH after 6 weeks
8. A 36 year old woman presents with complaints feeling tired, cold, amenorrhea and dizziness all the time since last two years after birth of her baby. Her BP is 90/60 mm Hg.
   What is the most appropriate diagnosis?
   a. Curling's syndrome
   b. Cushing's syndrome
   c. Pituitary Adenoma
   d. Sheehan's syndrome
   e. Thyroid Adenoma
9. A 43 year old woman presents for follow-up in clinic. She was diagnosed with Hashimoto's thyroiditis four months ago and is currently being treated with Levothyroxin 150 mcg OD. Her TSH is 2.0 (0.4 --- 4.5 mu/L). What is the most appropriate time for next TSH test?
   a. 2 weeks
   b. 4 weeks
   c. 6 weeks
   d. 8 weeks
   e. 12 weeks
10. A 33 year old woman was diagnosed with Hypothyroidism 10 months ago and is currently being treated with Levothyroxin 75 mcg OD. She comes to you in second month of gestation for antenatal checkup. What is the single most monitoring test(s) to assess her response to treatment?

a. FT4
b. FT4 & FT3
c. TSH alone
d. TSH & FT4
e. TSH, FT4 & FT3

11. A 16 year old girl presents with diffuse swelling in front of neck. She is otherwise healthy and asymptomatic. Which one of the following is the most likely diagnosis?
    a. DeQuervain's thyroiditis
    b. Endemic Goiter
    c. Hashimoto's thyroiditis
    d. Iodine Deficiency Goiter
    e. **Physiological Goiter**
12. A 33 year old woman presents with weight loss and excessive sweating. Her husband reports that she is 'on edge' all the time and during the consultation you notice a fine tremor. Her pulse rate is 120/min. A large, non-tender goiter is noted. Examination of her eyes is unremarkable. Her labs show
    Free T4 28pmol/l (9.0-----25 pmol/L)
    Free T3 12.2 pmol/l (3.0-7.5)
    TSH < 0.05 mu/l (0.4 --- 4.5 mu/L)
    What is the most likely specific initial treatment?
    a. Carbamizole
    b. Levothyroxin
    c. Propranolol
    d. Radioactive iodine
    e. Subtotal Thyroidectomy
13. A 29 years pregnant woman presents with palpitations, tremors, weight loss since 2 months. Her labs show;
    Free T4 28 pmol/l (9.0-----25 pmol/L)
    Free T3 12.2 pmol/ (3.0-7.5)
    TSH < 0.05 mu/l (0.4 --- 4.5 mu/L)

What is the single most appropriate specific treatment at this stage?

a. Carbamizole
b. Lugol's solution
c. Prednisolone
d. Propranolol
e. Propylthiouracil

14. A patient of 42 years presents with 5 days history of malaise, fever and painful thyroid. He had respiratory tract infection 2 weeks ago. His thyroid is enlarged and tender. He has palpitation, sweating, tremors. His pulse is 130 /min. What is your most appropriate initial symptomatic treatment?
    a. Carbimazole
    b. Paracetamol
    c. Prednisolone
    d. Propranolol
    e. Verapamil

15. A 34 years old man presents with symptoms of hypothyroidism one month after abruptly stopping 150 mg Thyroxin. What is the single most appropriate step in management?
    a. Double dose for one month only
    b. Resume with same dose of thyroxin
    c. Start with higher dose and decrease
    d. Start with low dose and increase
16. A 30 years old female presents with moon shaped face, buffalo hump and truncal obesity. Her physical exam shows increased blood pressure, easy bruising, acne and hirsutisun. What is the single most appropriate initial test for her condition?
    a. 24 hour urine Cortisol
    b. Dexamethasone suppression test
    c. Serum ACTH level
    d. Serum Cortisol level
    e. Urinary catecholamine
17. A 30 years old female presents with moon shaped face, buffalo hump and truncal obesity. Her physical exam shows increased blood pressure, easy bruising, acne and hirsutisun. Her Dexamethasone Suppression Test shows Cortisol ≥50 mmol/L. What is the single most appropriate next test for her condition?
    a. **ACTH level & 24 hr urine Cortisol**
    b. Evening Cortisol level
    c. Morning Cortisol level
    d. Serum ACTH level
    e. Urinary catecholamine
18. A 45 year old female presents to her GP with a two month history of lethargy, dizziness and weight loss. Her skin has darkened. Her BP is 90/50 mm Hg. Blood tests reveal the following:
    - Na+ 128 mmol/l
    - K+ 5.6 mmol/l

Which one of the following investigations is most likely to reveal the diagnosis?
    a. Dexamethasone suppression test
    b. Free T4
    c. Serum glucose
    d. Short Synacthen test
    e. TSH

19. A 45-year-old female presents to her GP with a two month history of lethargy, dizziness and weight loss. Her skin has darkened. Her BP is 90/50 mm Hg. Blood tests reveal the following:
    - Na+ 128 mmol/l
    - K+ 5.6 mmol/l

Which one of the following investigations is most likely to confirm the diagnosis?
    a. ACTH stimulation test
    b. Brain MRI
    c. Dexamethasone suppression test
    d. Spot urinary cortisol
    e. Ultrasound abdomen

20. A 34 years old man comes to your clinic for knee pain. His height is 7 ft, 4 inches and his weight is 170 Kg. What is the single most relevant blood test for disease associated with this condition?
    a. Blood sugar
    b. Uric acid
    c. TSH
    d. Prolactin
    e. Cortisol

21. 26 year old female presented in OPD with painless swelling in neck for 2 days. There is h/o palpitations and sweating. She delivered a male baby 3 months back. There was no H/o thyroid disorder in the past. No h/o fever.TSH = 0.001 mIU, Free T4= 16.5 mIU. What is the most appropriate drug at this stage?
    a. Carbamizole
    b. Propylthiouracil
    c. Lugol's solution
    d. Iodized salt
    e. Propranolol

22. A 45 year old with past history of TB treated in past presents with symptoms of severe pneumonia. He has been losing weight and his skin color is very much darkened. O/E: he is febrile, BP 90/50, pulse 105/min, regular. There are black patches inside his mouth. Initial investigations show Na+ 125, K+5.8 and CBC show mild anemia. What is the likely diagnosis?
    a. **Adrenal gland Tuberculosis**
    b. Congenital adrenal hyperplasia
    c. Cushing syndrome
    d. Nephrotic syndrome
    e. Sheehan syndrome

23. A 36-year-old female presents with weight gain, she also complains of weakness mainly after arising from squatting position. She also tells you that her skin is bruising easily. She is oligomenorhoric. She is not taking any regular medications. On examination, her BMI is raised, her limbs are thin and you notice there is edema on her legs, BP is 150/100
    a. Cushing Syndrome
    b. Depression
    c. Diabetes Mellitus
    d. Grave`s disease
    e. Hyperparathyroidism

24. A 34 year old man withType-1 DM comes to emergency, he appears confused, his heart rate is 120 beat/min regular, RR is 26/min, temp: 36.1°, he appears dry & has orthostatic hypotension. What is the most likely diagnosis?
    a. Addison's crisis
    b. **Diabetic ketoacidosis**
    c. Hypoglycemia
    d. Pituitary failure
    e. Thyrotoxic crisis

GASTRO

1. A 40 years old patient presents with bloating & heart burn for last 6 month. Examination is normal. Her Hb is 8.2 mg/dl, MCV is 60 fl, MCHC is 28 g/dl. What is most appropriate next step?
   A. Refer for endoscopy
   B. H. pylori eradication
   C. Ferrous sulphate
   D. PPI + iron therapy
   E. H_2RA + iron therapy

2. A patient of functional dyspepsia comes after a completion of H. pylori eradication therapy. What is the next most appropriate step regarding eradication of H. pylori?
   A. Urea breath test immediately
   B. Urea breath test after two weeks
   C. Serology test immediately
   D. Serology test two weeks after therapy
   E. No need unless strong clinical symptoms

3. A 20 years old athlete presents with recurrent jaundice since childhood usually after infections. He is otherwise fit and healthy. What is the most specific diagnostic test?
   A. Liver biopsy
   B. Ultrasound liver
   C. Fasting bilirubin
   D. Hepatitis serology
   E. Liver Transaminases

4. A 30 years old patient is worried of her report showing anti HAV IgG positive. She had jaundice 10 years back. But no investigations were done at that time. What is her current state?
   A. Incubation period
   B. Acute infection
   C. Carrier state
   D. Recovery state
   E. Chronic infection

5. A patient presented with report showing
   HBs Ag +
   HBe Ag +
   HBc IgM +
   What is the state of patient?
   A. Incubation period
   B. Acute infection
   C. Carrier state
   D. Recover state
   E. Vaccinated

6. A 20 years old patient presents with blood report showing
   Hep B s Ag Negative
   Hep B s Ab Positive

Hep B c Ig G Negative
Hep B e Ag Negative
What is her current state?

A. Chronic infection
B.Acute infection
C.Carrier state
D. Recovered state
E. Vaccinated

7. A 20 years old patient presents with blood report showing

Hep B s Ag Negative
Hep B s Ab Positive
Hep B c IgG Positive
Hep B e Ag Negative
What is her current stage?

A. Acute infection
B.Carrier state
C.Chronic infection
D. Recovered state
E. Vaccinated

8. A 12 years old boy presented to your clinic with history of intermittent fever with rigors, body aches and headache. Suspecting malaria you prescribed Chloroquine. Two days later he presents with pallor, jaundice and weakness. His labs show:

Total bilirubin 6.8
Direct bilirubin 2.6
Indirect bilirubin 4.2
SGPT 36
Alkaline phosphatase 170
Urine Urobilinogen increased
What is the most likely interpretation?

A. Acute viral hepatitis
B. Cholestatic jaundice
C. Gilbert's syndrome
D. Hemolytic jaundice
E. Obstructive jaundice

9. A 20 years old boy presents with recurrent mild jaundice since his childhood usually after inter-current infections and during fasting. His total bilirubin is 6 mg/ dl and unconjugated bilirubin is 5.1 mg/dl. All other liver function tests are normal. What is most appropriate diagnosis?

A. Crigglar Najjar syndrome
B. Dubin Johnson syndrome
C. Gilbert's Syndrome
D. Rotar's syndrome
E. Wilsons syndrome

10. A 37 years old male present with severe epigastric pain radiating to back since one hour which is worse on lying down. He is feeling nausea. He drinks 4 units of alcohol per day. His pulse is 110/min, B.P is100/60, temp 100° F. What is the single most likely diagnosis?
    A. Acute Cholecystitis
    B. Acute pancreatitis
    C. Alcoholic hepatitis
    D. Duodenal ulcer
    E. Reflux esophagitis

11. A 37 years old male present with severe epigastric pain radiating to back since one hour which is worse on lying down. He is feeling nausea. He drinks 4 units of alcohol per day. His pulse is 110/min, B.P is100/60, temp 100° F. What is the single most specific initial diagnostic test?
    A. Amylase
    B. CBC
    C. ERCP
    D. LDH
    E. Lipase

12. A mother seeks advice for her 6 years old daughter for her diarrhea and abdominal distention since last 2 years. Her symptoms are better when she takes rice. She is pale and has angular stomatitis as well. What is the single most appropriate initial non invasive test?
    A. H. pylori stool antigen
    B. Jejunal biopsy
    C. Stool detail exam
    D. Stool Reducing substance
    E. Transglutaminase antibodies

13. A 56 yrs old male comes with vomiting, weakness and episodic epigastric pain usually relieved by sitting forward. He has lost 3 Kg in last 6 month. He loves fried food and drinks alcohol 4 units / day. His blood sugar is 220 mg/dl, B.P 130/80 mm Hg, Pulse is 80/min and abdominal examination is normal. What will be the most appropriate diagnosis?
    A. Alcoholic cirrhosis
    B.Chronic Cholecystitis
    C.Acute pancreatitis
    D. Chronic pancreatitis
    E. Pancreatic cancer

14. A 56 yrs old male comes with vomiting, weakness and episodic epigastric pain usually relieved by sitting forward. He has lost 3 Kg in last 6 month. He loves fried food and drinks alcohol 4 units / day. His blood sugar is 220 mg/dl, B.P 130/80 mm Hg, Pulse is 80/min and abdominal examination is normal. What will be the most appropriate investigation for this condition?
    A. Amylase
    B. ERCP
    C. LDH
    D. Lipase
    E. Ultrasound

15. A 25-year-old school teacher presents with nausea, vomiting, anorexia and right upper quadrant pain for

the past 3 days. Two of the students in her class have come down with similar symptoms. Her pulse is 100/min, BP 110/70, respirations 18, temperature 101^0 F. Her sclera are icteric, her liver edge is tender. Her SGPT is 1440 (normal < 55). Which one test will you order to confirm your diagnosis?

A. Anti- HAV IgG
B. Anti-HAV-IgM
C. Anti HCV antibody
D. Anti-HBV s antigen
E. Anti HEV IgM

16. 27 years old University Student complains of jaundice since 2 days. He has also lost appetite and has fever. His investigations show:

Total Bilirubin = 5.6
Direct Bilirubin = 2.8
Indirect Bilirubin = 3.8
SGPT = 2480
Alkaline Phosphatase = 475

What is the most likely diagnosis?

A. Liver abscess
B. Obstructive jaundice
C. Gilbert's syndrome
D. Hemolytic jaundice
E. Acute viral hepatitis

17. A 17 years old boy comes for hepatitis B vaccination. He had received his first dose of vaccine 7 years ago. What is the single most appropriate step?

A. Check Hep B s antibody
B. Check Hep B s antigen
C. Give three doses one month apart
D. Restart vaccination
E. Resume vaccination

18. A manager in a bank is found to be Hepatitis B positive and is under interferon therapy since 4 months. She tells you that she has been losing hair, gaining weight and having puffiness of eyes. Which single test would you advise in order to make a diagnosis?

A. Creatinine
B. Urine analysis
C. Ultrasound KUB
D. Blood Sugar
E. TSH

19. A 50 year old lady complains of epigastric burning pains due to stress. She finally undergoes gastroscopy which shows gastro-esophageal reflux. Which medication is the most effective for her condition to control her symptoms?

A. Famotidine
B. Bismuth
C. Gaviscon
D. Magnesium trisilicate
E. Omeprazole

20. 30 year old patient presents with a complaint of passing 4-6 loose stool containing blood for six months. She has lower abdominal pain, faecal urgency, incontinence, back pain and painful red swelling on her shin. What is the most likely diagnosis?

    A. Amoebic colitis
    B. Crohns Disease
    C. Diverticulitis
    D. Irritable Bowel syndrome
    E. Ulcerative colitis

21. 45 year old patient presents with perianal abscesses for the last 1 year. He is passing 3-4 stools containing blood for last 7 months, there is anal skin tag & mass is palpable in R.I.F. What is the most likely diagnosis?
    A. Amoebic colitis
    B. Crohn's Disease
    C. Diverticulitis
    D. Irritable Bowel syndrome
    E. Ulcerative colitis

22. 30 years old patient presents with severe vomiting, diarrhea & abdominal pain 2 hours after attending a Bar BQ party. On examination temp is 98^0 F pulse 100/min & BP 80/60. Which organism is most likely responsible for it?
    A. C. Perfringens
    B. Salmonella
    C. E. Coli
    D. Cryptospridium
    E. Staph aureus

23. A marketing executive and presents with vomiting and paralysis in his limbs. He used the canned food last night. What could be the most probable organism causing this?

    A. Bacillus cereus
    B. Campylobacter jejuni
    C. Clostridium botulinum
    D. Cryptosporidium
    E. Salmonella typhi

24. A 36 yrs old male comes with central abdominal pain which is colicky in nature associated with distension of abdomen. Relieved by vomiting. He has not passed flatus for the last one day. His pulse 100/min, BP=100/60, Temp=99.6F°, R/R=26/min. There is no guarding and active tinkling gut sounds are audible. What is possible diagnosis?
    A. Diverticulitis
    B. Inflammatory bowel disease
    C. Intestinal obstruction
    D. Intestinal perforation
    E. Ischemic bowel

25. 60 years old male presents with abdominal fullness, loose motions containing mucus & peri-anal pain for last 6 weeks. His symptoms relieve by defecation and aggravates by stress & dairy products. What is most appropriate management?
    A. Mebeverine
    B. Loperamide
    C. Amitriptyline
    D. Avoid dairy products
    E. Refer to gastroenterology

26. 24 years old patient presents with constipation, abdominal pain, bloating & feeling of incomplete evacuation for last 2 year. Symptoms increased during her exams. Examination & investigations are insignificant. The single best choice for her constipation is;
    A. Bisacodyl
    B. Enema
    C. Ispaghol
    D. Lactulose.
    E. Senna

27. A 60 years old male comes with altered bowel habit, colicky pain in left side of abdomen for last one day. Relieved by defecation. O/E there is guarding in left iliac fossa. He has fever of 101^0 F. He usually takes fast food. What will be the diagnosis?
    A. Acute appendicitis
    B.Acute diverticulitis
    C.Irritable bowel syndrome.
    D. Intestinal obstruction
    E. Mesenteric obstruction

28. A 35 years old man comes with pain in his lower abdomen with constipation and bloating. His pain is relieved after defecation. Which laxative will make his bloating worse?
    A. Lactulose
    B.Castor oil
    C.Isphagula husk
    D. Senna leaves
    E. Bisacodyl

29. Which one of the following may be used to monitor patients with colorectal cancer during follow up of treatment?

    A.A CA-125
    B.A CEA
    C.A Alpha-fetoprotein
    D.A CA 19-9
    E.A CA 15-3

30. A 60 years old man presents for general check up because his father died at the age of sixty some 25 years ago because of colonic cancer. He denies weight loss, fever, bleeding per rectum or new

onset constipation. He does not have other co morbid condition. What is the single most definitive investigation to rule out colorectal carcinoma?

A. Barium enema
B. Colonoscopy
C. Sigmoidoscopy
D. Stool occult blood
E. Digital rectal exam

NEUROLOGY

1. A 45 years old labour comes with complain of severe headache and weakness of right hand for last 1 month. His wife complains about his irritability and socially inappropriate behaviour. What will be the most appropriate diagnosis?
    a. Complicated migraine
    b. Huntington's chorea
    c. Ischemic Stroke
    d. Space occupying lesion
    e. Temporal lobe Epilepsy
2. A 35 year old business executive presents to your office complaining of a 4-week history of daily headaches. He describes the headache as a band-like tightness that encircles the scalp and worsens as the day progresses. The most likely diagnosis is:
    a. Brain tumor
    b. Classic migraine
    c. Cluster headache
    d. Sinus headache
    e. Tension headache
3. A 40 year old man comes to you with hiccups, they are intermittent for last 3 days but today they have been ongoing for past 4 hours. He has tried drinking water, distraction technique and also tried holding his breath but no response. He is asking if you could prescribe him some medication. What is the most appropriate drug for this condition?
    a. Chloral hydrate
    b. Chlorpromazine
    c. Clonazepam
    d. Metoclopramide
    e. Prochlorperazine
4. A 60 year old male comes to you with scalp tenderness when combing hair and headache for past 3 days. He also complains of shoulder pain and stiffness since last many months. This morning he noticed reduced vision in right eye. Which investigation would be the most appropriate treatment?
    a. Amitriptylin
    b. Diclofenac
    c. Oxygen
    d. Prednisolone
    e. Tramadol
5. A 30 year old married lady comes to you for contraception advice. She has 3 kids. She is known to suffer from migraine headache with aura for last 5 years. Her BMI is 32. She would prefer to have either a tablet or injection for contraception. Considering her past medical history which of these would be safe and effective option in her case?
    a. Abstinence method

b. Barrier methods
c. Combined oral contraceptive pill
d. Emergency contraception
e. Progesterone only pill

6. You see a 28 year old lady with bilateral headache for past 6 weeks. It started soon after commencing new job which is 12 hours long along with 2 hours of travel. You suspect tension headache as the cause. Which of the following statements favours your diagnosis of tension headache?
   a. Tension headache is unilateral
   b. It does not worsen with head movements
   c. It can be triggered by changes in weather
   d. It is not commonest form of primary headache
   e. It is associated with throbbing headache
7. A 24 year old patient comes to your office for assessment of headache. The headache is preceded by nausea and vomiting, confined to the left side of the head, and characterized by a throbbing pain lasting approximately 48 hours. It always begins approximately 2 days before menstruation, and it always ends with the onset of menstruation.
   On physical examination, the patient's blood pressure is 120/70 mm Hg. Her optic fundi are clear, and her neurologic examination is completely normal.
   What is the most likely type of headache in this patient?
   a. Menstrual migraine
   b. Migraine without aura
   c. Premenstrual dysphoric disorder
   d. Premenstrual syndrome
   e. Secondary Dysmenorrhea
8. A 24 year old patient comes to your office with headache associated with nausea and vomiting, that begins approximately 2 days before menstruation, and it always ends with the onset of menstruation. On physical examination, the patient's blood pressure is 120/70 mm Hg. She tried Mefenamic acid for 3 cycles, but has poor result. What will be the next most appropriate step?
   a. Amitriptyline
   b. Norethisterone
   c. Oral contraceptive pills
   d. Trans dermal oestrogen
   e. Zolmitriptan
9. A 38-year-old female comes to your office with a 6-year history of recurrent headaches. She is concerned that she may be having some kind of stroke because before the headache, nausea, and severe vomiting begin she sees a "type of odd visual feeling or sight-flashing lights, almost like a pattern in front of my eyes". She is otherwise healthy and taking no medications. Physical examination is normal. What is the most likely type of headache in this patient?
   a. Migraine headache without aura (common migraine)
   b. Migraine headache with aura (classic migraine)

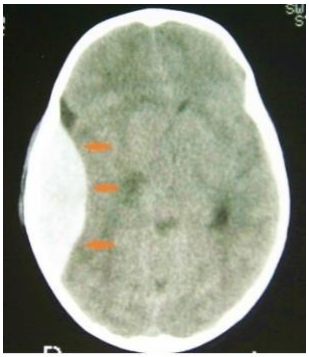
a. Basilar migraine
b. Tension-migraine syndrome
c. Complicated migraine headache

10. A 38-year-old female comes to your office with a 6-year history of recurrent headaches. She is concerned that she may be having some kind of stroke because before the headache, nausea, and severe vomiting begin she sees a "type of odd visual feeling or sight-flashing lights, almost like a pattern in front of my eyes". She is otherwise healthy and taking no medications. Physical examination is normal. What is the most appropriate initial drug for this patient?
    a. Diclofenac
    b. Ergotamine
    c. Paracetamol
    d. Tramodol
    e. Zolmitriptan
11. 45-year-old male comes to your office with a 1-week history of recurrent severe headaches that wake him up in the middle of the night. The headaches have been occurring every night and have been lasting approximately 1 hour. The headaches are described as a deep burning sensation centered behind the left eye and are associated with watering of affected eye. Rest of history and examination are unremarkable?
    What is the most likely cause of this patient's headache?
    a. Atypical migraine headache
    b. Classic migraine headache
    c. Cluster Type headache
    d. Subarachnoid haemorrhage
    e. Tension-migraine syndrome
12. A 13 year old boy has been brought by his mother saying that he often stares into the sky for few minutes and is lost if deep thoughts and does not respond to her. His EEG shows a 3-per-second spike and wave discharge pattern. Which of the following statements about this condition is false?
    a. This is a generalized problem
    b. Child usually has no recall of the episode
    c. It is accompanied by lip smacking and chewing
    d. This is best treated with Phenytoin
    e. Voluntary hyperventilation can precipitate it
13. A 72 year old known to have Parkinson disease and has functional disability. He is stable on Levodopa. He occasionally gets confusion and hallucination but has been told these are due to side effects of anti-Parkinson medication. Which of the following conditions is most closely associated with Parkinson's disease?
    a. Cerebrovascular disease
    b. Generalized Epilepsy
    c. Major depressive disorder
    d. Schizoaffective disorder
    e. Schizophrenia

14. A 20 year old lady comes to you with headache (generalised) for past 2 months. She has had 2 episodes of vomiting as well. She has noticed that it gets better on standing. Her past medical history includes hypothyroidism. On examination she is obese (BMI- 32), BP 110/70 and has bilateral papilledema. CNS examination reveals no focal neurological deficit. What is the most likely diagnosis in this patient?
    a. Benign Intracranial Hypertension
    b. Malignant hypertension
    c. Migraine headache
    d. Multiple sclerosis
    e. Tension headache
15. A 25 year old presents with very sudden headache and vomiting since this morning. Patient says he was having breakfast when it began and had to stop everything as he could not concentrate due to severity of headache. His father also died at young age. He has no significant past medical history. On examination he is alert and oriented and you notice meningism but no rash. He is afebrile.
    a. Acute meningitis
    b. Cluster headache
    c. Hemorrhagic Stroke
    d. Refractory migraine
    e. Subarachnoid hemorrhage
16. A 6 year old is brought in your clinic with fever and sore throat. Mother tells you that she noticed a rash on front of chest last night which disappeared this morning. You explain her red flag signs and the glass (tumbler) test for meningitis. What will you tell the mother about the rash on pressing glass against it?
    a. Blanching rash is non-serious
    b. Blanching rash is serious
    c. Non blanches rash is non-serious
    d. Non Blanching rash is serious
17. A 32 years man presents with road traffic accident one hour ago. He complains of headache as he hit his head against a pole. Which one of the following goes against the diagnosis of fracture base of skull?
    a. Battle`s sign
    b. Bleeding from ear
    c. CSF otorrhoea
    d. CSF rhinorrhoea
    e. Parietal bone fracture
18. A 65 years old man has resting tremors and mild slowing a movement. You suspect symptoms are due to Parkinson's disease, what is the initial drug of choice for him?
    a. Amantadine
    b. Bromocriptine
    c. Carbidopa
    d. Levodopa

e. Selegiline

19. An 18 year old comes after road traffic accident (RTA) 10 days ago. He brings his investigations which include skull X-ray and CT scan done in A&E then. You notice biconvex shaped haematoma of increased density on CT Head. Which type of haematoma is this?



a. Extradural hematoma
b. Intracerebral Hematoma
c. Intraventricular hematoma
d. Subarachnoid hematoma
e. Subdural Hematoma

20. A mother comes to your office with her 12 year old daughter stating that for the past 6 months she frequently has noted the child staring into space. This lack of concentration usually lasts only 30 to 45 seconds. The child's neurologic examination is normal. What is the most appropriate treatment for her condition?

a. Carbamezapine
b. Oxcarbazapine
c. Phenytoin
d. Sodium Valproate
e. Topiramate

21. A 22-year-old male is brought after losing consciousness and having jerky movements of all 4 limbs while gardening at home. On examination, the patient is drowsy. There is a large laceration present on his tongue and a small laceration present on his lip. The neurologic examination is otherwise normal. What type of seizure is this patient suffering from?

a. Absence seizure
b. Complex partial seizure
c. Myoclonic seizure
d. Simple partial seizure
e. Tonic Clonic Seizure

22. A 30 year old male presents complaining of back pain radiating down his right leg. On exam, you note that his knee jerk reflex is absent on the right. This finding suggests compression of which spinal nerve root?

a. C5-C6
b. L1-L2
c. L3-L4
d. S1-S2
e. T11-T12

23. A 45 years man presents with headache. There is no obvious cause for his headache. Which one of his medicines is least likely to cause headache as side effect?

a. Clonidine
b. Lisinopril
c. Loratidine

d. Metoprolol
e. Omeprazole

24. A 55 year old man with previous history of colon cancer presents with headache for 2 weeks. It's worse in the morning and has woken him from sleep on a few occasions. There is no vomiting but his wife says he appeared confused yesterday. He takes Paracetamol 2-3 times / day for past 1 week. He is not taking any other medications regularly. CNS Examination is normal. What would you advise him?
    a. CT scan
    b. Fundoscopy
    c. MRI Brain
    d. No investigation
    e. Skull X-rays
25. A 25 years old epileptic comes to discuss his driving restriction. Your suggestion to regain driving license to drive his personal car is;
    a. Seizure free for 1 year
    b. Seizure free for 2 years
    c. Seizure free for 3 years
    d. Seizure free for 4 years
    e. Seizure free for 5 years
26. A 30 years well controlled epileptic woman comes to your clinic. She wants referral to neurologist. Which condition will NOT require a referral in this case?
    a. Concurrent illness
    b. Drug side effect
    c. Poor Control
    d. Pre conceptual advice
    e. Seizure free > 2 year
27. A 24 years old woman presents with facial asymmetry since last three days. Her face is pulled towards right side and there is drooling of saliva from left side. She is unable to lift her eye brows. Which nerve is most likely involved.
    a. Right lower motor neuron
    b. Left lower motor neuron
    c. Left upper motor neuron
    d. Right lower motor neuron
28. A 5 year old known to have ALL (acute lymphocytic leukemia) develops measles. He presents with fever, confusion and decreased conscious level. Which of the following would you suspect:
    a. Encephalitis
    b. Meningitis
    c. Migraine
    d. Sinusitis

e. Subarachnoid haemorrhage

29. A 52 years old man present with foot drop after a road traffic accident one month ago. Which of the following nerve is most likely involved?
    a. Femoral nerve
    b. Peroneal nerve
    c. Sciatic nerve
    d. Sural nerve
    e. Tibial nerve
30. A 40 years old smoker presents with first episode of jerky movements of left hand leading to generalized tonic clonic seizure. On examination these is weakness of left forearm. He admits to having headache since 2 weeks. What is the single most appropriate step in management?
    a. Electroencephalogram
    b. Nerve conduction studies
    c. Oxygen saturation
    d. Refer to neurologist
    e. Start Valproate

GASTRO PRE SESSION ASIGNMENT

1. A 60 yr old man presents with epigastric his ultrasound is normal, pain after meals for the last two months. Pain is associated with bloating and heart burn. What is the most appropriate management step?
    A. Barium meal
    B. H Pylori testing
    C. Refer for Endoscopy
    D. Stool Examination
    E. Trial of Omeprazole

2. A 65 year old male present with difficulty swallowing for the last 2 years. His first bite is easily swallowed but he then gets progressive dysphagia. He has had recurrent chest infections. There is a palpable neck swelling which has appeared after his meal half an hour ago. What is the most probable diagnosis?
    A. Esophageal achalasia
    B. Globus hystericus
    C. Laryngeal pouch
    D. Pharyngeal pouch
    E. Thyroid swelling
3. A patient presents with severe watery diarrhoea for the last 2 days. He is using Clindamycin for acne since one week. What is the most appropriate and cost-effective treatment for his diarrhoea?
    A. Ciprofloxacin
    B. Doxycycline
    C. Loperamide
    D. Metronidazole
    E. Vancomycin
4. A 40 year old manager presents with persistent diarrhoea for the last 8 weeks. He has been travelling to different field sites since last 3 months. He is losing weight. He has a mild fever. What is the single most appropriate set of test in the initial stage?
    A. CBC , ESR and stool culture
    B. CBC , LFTs
    C. Colonoscopy
    D. Sigmoidoscopy
    E. Stool exam and culture
5. A patient, who suffers from irritable bowel syndrome (IBS) with loose stools, has had an unsatisfactory response to Loperamide and antispasmodics. Which class of medication does NICE suggest as second line treatment for IBS?
    A. Anticholinesterase inhibitor
    B. Atypical antipsychotic
    C. Benzodiazepine
    D. Selective serotonin reuptake inhibitor
    E. Tricyclic antidepressant
6. A 35 years old man who is usually fit and well presents to his GP with a 2 month history of indigestion. His weight is stable and there is no history of dysphagia. Examination of the abdomen is unremarkable. What is the most suitable initial management?
    A. Urea breath testing
    B. H pylori eradication therapy
    C. Referral for endoscopy
    D. Barium meal
    E. Proton pump inhibitor
7. A 30 year old woman is admitted to hospital with abdominal pain and diarrhoea. She has no past medical history other than depression for which she takes Citalopram. She smokes 20 cigarettes/day and drinks 20 units of alcohol /week. Clonoscopy shows features consistent with Crohn's disease and she is treated

successfully with glucocorticoid therapy. Which one of the following is the most important intervention to reduce the chance of further episode?

A. Infliximab
B. Stop alcohol
C. Stop smoking
D. Sulphasalazine
E. Prednisolone

8. A 35 years old lady has symptoms of intermittent central abdominal discomfort and loose stools since last one year. She complains of lethargy, myalgia, sores at the angle of mouth. Her Investigations reveal:

Hb 8.5 g/dl
MCV 85fl
WBC 6 * 10 g/L
Ferritin 20 umol/l (Low)
Folate 2 ug/l (Low)

What is the most definitive investigation to diagnose her condition?

A. Sigmoidoscopy
B. Small bowel biopsy
C. Smooth muscle antibodies
D. Ultrasound of abdomen
E. Barium meal and follow through

9. 40 years old male comes with diarrhoea for the last one and a half month. He has been to different doctors but of no use. You took history and found him to be a diabetic with poor control for the last ten years. What could be the most probable cause for his diarrhoea?

A. Autonomic neuropathy
B. Carcinoid syndrome
C. Chronic Malabsorption
D. Chronic pancreatitis
E. Irritable bowel syndrome

10. 40 years old male comes with abdominal fullness, nausea, indigestion for the last six months. He has been to different doctors but of no use. He is diabetic for the last ten years and his blood sugars are mostly uncontrolled. His examination is unremarkable. What could be the most appropriate initial drug for his stomach problem according to NICE guidelines?

A. Domperidone
B. Erythromycin
C. Metoclopramide
D. Any of the above

11. A 42 years old woman is investigated for lethargy and diarrhoea. Investigations reveal celiac disease. Which of the following food stuffs she can take?

A. Beer
B. Bread
C. Maize
D. Pasta
E. Rye

12. A 45 years old woman presents with abdominal pain and chronic diarrhoea. Her symptoms increase during the days of stress. Her lab workup is normal. Which of the following favours her diagnosis of IBS?
    A. Continuous symptoms
    B. Intermittent symptoms
    C. Liquid stools with blood
    D. Nocturnal symptoms
    E. Significant weight reduction
13. A 46 years old diabetic male comes with abdominal discomfort and nausea after eating fried food. His BMI 28 kg/m2 and takes alcohol 3 units /week. His ultrasound shows multiple gall stones of size more than 1 cm2. What is the most appropriate next step in management?
    A. ERCP
    B. Laproscopic cholecystectomy
    C. Lithotripsy
    D. Open cholecystectomy
    E. Ursodeoxycholic acid
14. A 40 years old man presents with symptoms of dyspepsia intermittently over the past few months. He denies any symptoms of bleeding, dysphagia or weight loss, does not drink alcohol and is normally fit and well. He is not on any current repeat medication and has only been taking antacids which improve his symptoms. Examination is normal. What is the single most appropriate initial step in management?
    A. Proton pump inhibitor
    B. H2-receptor antagonist
    C. Refer for endoscopy
    D. Faecal occult blood testing
    E. Alginate self care
15. A 62 year old male is diagnosed with pain in left lower abdomen, fever and diarrhoea since last 3 days. He has chronic constipation and was diagnosed with diverticulosis in the past. What treatment will you advise him?
    A. Cefaclor
    B. Ciprofloxacin
    C. Doxycycline
    D. Metronidazole
    E. Cotrimoxazole
16. A mother brings 6 months old baby presents with a history a red mass coming down the anus with anal discharge for a few weeks. The mass is small pinkish, round and smooth. What is the most appropriate treatment?
    A. Lactulose
    B. Glycerine suppositories
    C. Refer him to a surgeon
    D. Metronidazol
    E. Mebendazole
17. 31 years old man presents with four loose stools in a day which do not contain blood. He has been having this problem off and on since last many years. He has an important interview after two days. He has also

experienced some urgency in stool but is otherwise systemically well. What is the most appropriate management?

A. Mesalazine
B. Metronidazole
C. Ciprofloxacin
D. Mebeverine
E. Loperamide

18. A 60 year old man is complaining of difficulty in swallowing and hoariness of voice, which has been getting slowly worse over the past 3 months. He has lost around two KG weight. He has no pain when swallowing and has no regurgitation of food. What is the most likely diagnosis?

A. Achalasia
B. Globus hystricus
C. Oesophageal spasm
D. Oesophageal carcinoma
E. Gastro esophageal reflux

19. A 35 year old man complains of constipation off and on, he says he does not pass stool daily rather sometimes after 2 days or 3 days. What is the most appropriate initial management?

A. Lifestyle measures
B. Lactulose
C. Bisacodyl
D. Senna leaves
E. Glycerine suppositories

20. A 35 year old female presents with abdominal pain associated with bloating for the last six months. Which of the following symptoms go against diagnosis of irritable bowel syndrome?

A. Incomplete evacuation
B. Back pain
C. Weight loss
D. Lethargy
E. Nausea

21. A pregnant lady develops jaundice during first trimester. Her blood test shows Hepatitis b s Ag positive. What is the most appropriate next step?

A. Vaccinate mother
B. Immunoglobulin to mother
C. Termination of pregnancy
D. Immunoglobulin and vaccine to baby
E. Liver enzymes and vaccine to baby

22. A 33 years old man presents with epigastric pain since last month. He denies blood in stool, fever, weight loss. He denies taking any new drug. He takes food from Cafeteria and takes 10-12 cups of tea every day. His BP is 100/70 mm/Hg, pulse is 88 BPM. His general physical examination is unremarkable and there is mild tenderness in abdomen. What is the single most appropriate management at this age according to NICE guidelines for dyspepsia?

A. Trail of Omeprazole
B. Self care Alginate

C. H. pylori testing
D. Life style changes
E. Add Ranitidine

23. A 32 years old man presents with epigastric pain since last month. He denies blood in stool, fever, weight loss. He is taking tab Naproxen 500 mg twice a day since last one month. His BP is 100/70 mm/Hg, pulse is 88 BPM. His general physical examination is unremarkable and there is mild tenderness in abdomen. What is the single most appropriate management step according to NICE guidelines?
    A. Continue Naproxen and PPI
    B. Refer for upper GI Endoscopy
    C. Replace Naproxen with Paracetamol
    D. Start PPIs and H2 receptor blocker
    E. Stop Naproxen and trial of PPI
24. A 32 years old man presents with epigastric pain since last month. He denies blood in stool, fever, weight loss. He denies taking any new drug or change in his eating habits. His BP is 100/70 mm/Hg, pulse is 88 BPM. His general physical examination is unremarkable and there is mild tenderness in abdomen. What is the single most appropriate management for this patient at this age?
    A. Trail of Omeprazole
    B. Injection Transamine
    C. Refer for endoscopy
    D. Admit in Hospital
    E. Stool Occult Blood
25. A 32 years old man presents with one month history of epigastric burning and pain. He denies bleeding, malena, bleeding per rectum, weight loss or fever. He is taking tab Esomeprazole 40 mg once daily since last one month but only reports partial improvement in his symptoms. What is the single most appropriate management step according to NICE guidelines?
    A. Barium meal
    B. H. pylori screening
    C. Refer for Endoscopy
    D. Stool Occult Blood
    E. Ultrasound Abdomen
26. A 34 years old man presents with one month history of epigastric burning and pain. He denies bleeding, malena, bleeding per rectum, weight loss or fever. He is taking tab Esomeprazole 40 mg once daily since last one month but only reports partial improvement in his symptoms. His H. pylori testing is also negative. What is the single most appropriate management step according to NICE guidelines?
    A. Alginate
    B. Domperidone
    C. Levosulpiride
    D. Ranitidine
    E. Sucralfate
27. A 35 years old man presents with one month history of epigastric burning and pain. He denies blood in stool, fever, weight loss. His pain radiates to the back and mostly occurs after meals. He denies taking any new drug or change in his eating habits. His BP is 100/70 mm/Hg, pulse is 88 BPM. His general physical and abdominal examinations are unremarkable. What is the single most appropriate diagnostic test at this stage according to NICE guidelines?
    A. X-ray abdomen
    B. Barium swallow

C. Barium meal
D. Ultrasound abdomen
E. ST scan abdomen

28. A 28 years old woman presents with fullness in her upper abdomen and belching off and on since last two years. She denies weight loss, fever, malena, or vomiting. Her ultrasound abdomen and upper GI endoscopy done last year were normal. What is the single most appropriate next step in management?
    A. Alginate
    B. lactulose
    C. Levosulpiride
    D. Omeprazole
    E. Ranitidine
29. A 60 years old man presents for general check up because his father died at the age of 60 years 25 years ago because of colonic cancer. He denies weight loss, fever, bleeding per rectum or new onset constipation. He does not have other co morbid condition. What is the single most appropriate "annual" investigation for him?
    A. Barium enema
    B. Colonoscopy
    C. Sigmoidoscopy
    D. Stool occult blood
    E. Digital rectal exam
30. A 38 years old obese woman presents with retrosternal burning, bad taste in mouth especially in the morning, regurgitation of sour fluid since last 6 months. She denies weight loss, vomiting, malena or difficulty in swallowing. She is taking sym Alginate which does not improve her symptoms. Apart of conservative measures what is the single most appropriate long term therapy for her?
    A. Domperidone
    B. Esomeprazole
    C. Famotidine
    D. Levosulpiride
    E. Sucralfate

ENDO PRE SESSION

1. A 14 year old girl comes with her mother with complaint of passing more urine, increasing thirst and losing weight. What is the single most likely diagnosis?
    a. Anorexia nervosa
    b. Diabetes insipidus
    c. Type I Diabetes
    d. Type II Diabetes
    e. Urinary tract infection

2. A 64 year old obese man comes with complaint of burning sensation in his feet at night with joint pains. On physical examination, you noticed decreased sensations in his toes and calluses on his lateral fifth digits. What is the single most appropriate initial investigation in primary care?
    a. Fasting Blood sugar
    b. Lumbar X-ray
    c. Nerve conduction
    d. Serum B12 levels
    e. TSH & T4

3. A 30 years old male with previously diagnosed with diabetes on the basis of weight loss more than 20 kg in 6 months. He also reports polyuria, polydipsia, and polyphagia. His fasting sugar is 390 mg/dl and Random Blood sugar is 480 mg/dl. His BP is 140/85, BMI 30 kg/M^2. What you suspect in this case?
    a. Insulin resistance
    b. LADA
    c. MODY
    d. Type I
    e. Type II

4. A 19 year newly married woman presents with the complaint of frequent urination and thirst for the last two weeks. Her LMP was 3 weeks ago. Otherwise she has normal physical examination. On history, she gives strong family history of diabetes in first degree relatives. On lab her blood sugar is 220 mg/dL. Now what you suspect in this case?
    a. Gestational
    b. LADA
    c. MODY
    d. Type I
    e. Type II
5. A 28 years old lady $G_4P_2A_1$ presents for monthly check-up at 25 weeks of gestation, with history of fatigue, increased urination and increased appetite. What is the single most appropriate diagnostic test?
    a. Fasting blood sugar
    b. Glucose Challenge Test
    c. Glucose Tolerance Test
    d. HbA1c
    e. Random Blood Sugar
6. A 40 years old man presents with lethargy and increased urination. His weight is 90 Kg, BP is 140/90 mm Hg, pulse is 90 BPM. There is black discoloration on the back of neck and skin tags in the neck. His random blood sugar is 210 Mg/dl. What is the single first line drug for his condition?
    a. Acarbose
    b. Gliclizide
    c. Sitagliptan
    d. Insulin
    e. Metformin

7. A 38 years old man presents with the complaint of lethargy and his Random Plasma Glucose is 200 mg/dL. His family history is positive for diabetes. What is the single most appropriate time repeating random blood sugar in order to confirm his diabetes?
    a. After one week
    b. Same day
    c. Six weeks
    d. Three months
    e. Within a week

8. A 48 year old man who was diagnosed with type 2 diabetes mellitus presents for review. During his annual review he was noted to have the following results: Total cholesterol 204 mg/dl, HDL cholesterol 40 mg/dl, LDL cholesterol 126 mg/dl, Triglyceride 210 mg/dl, HbA1c 6.4%. His current medication is Metformin 500 mg TDS. According to recent NICE guidelines, what is the most appropriate starting dose of Atorvastatin in this case?
    a. Atorvastatin 10 mg
    b. Atorvastatin 20 mg
    c. Atorvastatin 40 mg
    d. Atorvastatin 80 mg
9. A 52 year old man has a set of fasting bloods as part of a work-up for hypertension. The fasting glucose comes back as 105 mg/dl. The test is repeated and reported as 120mg/dl. Random blood glucose is 140 mg/dl. He says he feels constantly tired but denies any polyuria or polydipsia. How should these results be interpreted?
    a. Diabetes mellitus
    b. Impaired fasting glucose
    c. Impaired glucose tolerance
    d. Normal for his age
    e. Transient hyperglycemia

10. You are review a 38 year old woman with type 1 diabetes mellitus in clinic. Her diabetes is currently controlled with a basal bolus regime. She takes no other medication apart from Citalopram 20 mg OD for depression. She was diagnosed with type 1 diabetes at the age of 13 years. Her most recent bloods show

Total cholesterol	210 mg/dl
HDL cholesterol	42 mg/dl
LDL Cholesterol	150 mg/dl
Triglyceride	190 mg/dl

Urine dip: No protein or blood
What is the most appropriate management with regards to lipid modification?
    a. Start Atorvastatin 10 mg
    b. Start Atorvastatin 20 mg
    c. Start Atorvastatin 40 mg
    d. Start Atorvastatin 80 mg

e. Atorvastatin not required

11. A 52 years old man became drowsy and lethargy. The record of their visit shows that he as drowsy and the blood glucose was 58 mg/dl. After giving him an oral glucose paste the patient's condition significantly improved. A carer from the nursing home is present and reports that he has had regular 'hypos' recently.

His current medication is as follows:

Metformin	1	g bd
Gliclazide	160	mg od
Pioglitazone	45	mg od
Aspirin	75	mg od
Simvastatin	40	mg od

What is the most appropriate immediate action?

a. Make no changes to the medication
b. Sop pioglitazone
c. Stop all oral antidiabetic medications
d. Stop gliclazide
e. Stop metformin

12. A 35 years old woman brings her laboratory investigations which were done as part of pre-employment checkup for her new job. Her TSH is 11 mu/L (0.4 --- 4.5 mu/L), FT4 7.2 pmol/L (9.0-----25 pmol/L). What is the single most appropriate step in management?
    a. NSAIDs
    b. Prednisolone
    c. Thyroid scan
    d. Thyroid ultrasound
    e. Thyroxin
13. A 32 years old woman brings her laboratory investigations which were done as part of pre-employment checkup for her new job. Her TSH is 11 mu/L (0.4 --- 4.5 mu/L), FT4 14.2 pmol/L (9.0-25 pmol/L) is within normal limits. What is the single most appropriate step in management?
    a. NSAIDs
    b. Prednisolone
    c. Thyroid scan
    d. Thyroid ultrasound
    e. Thyroxin
14. A 35 years old woman brings her laboratory investigations which were done as part of pre-employment checkup for her new job. Her TSH is 9 mu/L (0.4 --- 4.5 mu/L), FT4 16.2 pmol/L (9.0-----25 pmol/L). What is the single most appropriate step in management?
    a. Prednisolone
    b. Thyroid scan
    c. Thyroid ultrasound
    d. Thyroxin
    e. Watchful waiting
15. A 40 year old woman complains of feeling tired all the time and putting on weight. On examination a diffuse, non-tender goiter is noted. Blood tests show:
    TSH 45.1 mU/l (0.4 --- 4.5 mu/L) Free FT4 4.1 pmol/l (9.0-----25 pmol/L)
    What is the most likely diagnosis?

a. De Quervain's thyroiditis
b. Hashimoto's thyroiditis
c. Primary atrophic hypothyroidism
d. Reidel's Thyroiditis
e. Secondary Hypothyroidism

16. A 40 year old woman complains of feeling tired all the time and putting on weight. On examination a diffuse, non-tender goiter is noted. Blood tests show:
TSH 45.1 mU/l (0.4 --- 4.5 mu/L) Free FT4 4.1 pmol/l (9.0-----25 pmol/L)
What is the most appropriate test to confirm the cause of this condition?
a. Thyroid FNAC
b. Thyroid Peroxidase Antibodies
c. Thyroid scan
d. Thyroid Stimulating Antibodies
e. Thyroid Ultrasound
17. A 43 year old woman presents with a tender goiter with history of viral upper respiratory infection one week ago, thyroid function test show;
TSH <0.05 mU/l (0.4 --- 4.5 mu/L)
Free T4 29.7 pmol/l(9.0-----25 pmol/L)
What is the most likely diagnosis?
a. Reidel's Thyroiditis
b. Secondary hypothyroidism
c. Sick Euthyroid syndrome
d. Sub acute thyroiditis
e. Subclinical hypothyroidism
18. A 43 year old woman presents with a tender goiter with history of viral upper respiratory infection one week ago, thyroid function test show;
TSH <0.05 mU/l (0.4 --- 4.5 mu/L)
Free T4 29.7 pmol/l(9.0-----25 pmol/L)
What is the most initial treatment?
a. Acyclovir
b. Methamizole
c. Prednosolone
d. Propranolol
e. Propyl Thiouracil
19. A 52 year old woman who was diagnosed as having primary atrophic hypothyroidism 12 months ago is reviewed following recent thyroid function tests (TFTs):
TSH 8.5 mU/l (0.4 --- 4.5 mu/L)
Free T4 14 pmol/l (9.0-----25 pmol/L)
She is taking 75mcg of Levothyroxin once a day since last 6 months. What is the single most appropriate management step to improve her condition?
a. Change brand of Thyroxin
b. Check Thyroid antibodies
c. Decrease Thyroxin
d. Increase Thyroxin
e. Repeat test after 3 months
20. A 52 year old woman who was diagnosed as having primary atrophic hypothyroidism 12 months ago is reviewed following recent thyroid function tests (TFTs):
TSH 0.05 mU/l (0.4 --- 4.5 mu/L)
Free T4 24 pmol/l (9.0-----25 pmol/L)

She is taking 75mcg of Levothyroxin once a day since last 6 months. What is the single most appropriate management step to improve her condition?

a. Change brand of Thyroxin
b. Check Thyroid antibodies
c. Decrease Thyroxin
d. Increase Thyroxin
e. Repeat test after 3 months

21. A 42 years old man presents with weight gain and hoarseness of voice. He is one multiple medications for his health conditions. His medications include Esomeprazole, Itopride, Gabapentin, Aspirin and Amiodarone. His test shows TSH of 18 mu/L. Which drug is most likely to cause this condition?
    a. Amiodarone
    b. Aspirin
    c. Esomeprazole
    d. Gabapentin
    e. Itopride
22. A 36 year old woman presents with feeling tired, cold and dizzy all the time since last two years after birth of her baby. Her BP is 90/60 mm Hg and complains of oligomenorrhea. Blood tests reveal the following:
    TSH 0.02 mU/l (0.4 --- 4.5 mu/L)
    Free T4 3.4 pmol/l (9.0-----25 pmol/L)
    What is the most appropriate next diagnostic test to identify the cause of her condition?
    a. MRI Brain
    b. Reverse T3 levels
    c. Thyroid Antibodies
    d. Thyroid FNAC
    e. Thyroid Ultrasound
23. A 43 year old woman presents for follow-up in clinic. She was diagnosed with Hashimoto's thyroiditis four months ago and is currently being treated with levothyroxin 75 mcg OD. What is the single most important blood test to assess her response to treatment?
    a. Free T3
    b. Free T4
    c. Thyroid antibody titre
    d. Total T4
    e. TSH
24. A 33 year old woman was diagnosed with Hypothyroidism 10 months ago and is currently being treated with Levothyroxin 75 mcg OD. She comes to you in second month of gestation for antenatal checkup. What is the single most monitoring test(s) to assess her response to treatment?
    a. FT4
    b. FT4 & FT3
    c. TSH alone
    d. TSH & FT4
    e. TSH, FT4 & FT3
25. A 33 year old female presents with features suggestive of thyrotoxicosis. She opts for radioiodine therapy on the advice of her Endocrinologist. Which one of the following is the most likely common adverse outcome of radioactive iodine ablation therapy?
    a. Agranulocytosis
    b. Hypothyroidism
    c. Oesophagitis
    d. Precipitation of thyroid eye disease
    e. Thyroid malignancy

26. A 33 year old woman presents with weight loss and excessive sweating. Her husband reports that she is 'on edge' all the time and during the consultation you notice a fine tremor. Her pulse rate is 120/min. A large, non-tender goiter is noted. Examination of her eyes is unremarkable. Her labs show
    Free T4 28pmol/l (9.0-----25 pmol/L)
    Free T3 12.2 pmol/l (3.0-7.5)
    TSH < 0.05 mu/l (0.4 --- 4.5 mu/L)
    What is the most likely diagnosis?
    a. De Quervain's thyroiditis
    b. Graves' disease
    c. Hashimoto's thyroiditis
    d. T3-secreting adenoma
    e. Toxic multinodular goiter
27. A 65 years old woman has been brought by family members because she does not respond to their speech. On examination she is obese with generalized edema, BP is 90/50 mm Hg, pulse 46 BPM, and she is confused. There are bilateral crepts and she has Ascites. Her lips and tongue are swollen. What is the single most appropriate management step?
    a. Admit in hospital
    b. TSH and Thyroxin
    c. Trial of Furosamide
    d. Serum Cortisol
    e. MRI brain
28. A mother brings her 6 weeks old baby for vaccination. On query she tells you that she is breast feeding her baby and taking tab Carbimazole 30 mg/day. The baby is clinically normal. What is the single most appropriate investigation for baby?
    a. T 4
    b. FT 4
    c. TSH
    d. T 3
    e. FT 3
29. A 60 years old woman presents with features of Hypothyroidism and her TSH comes > 100 IU and FT4 less than normal. She has an insignificant past medical and surgical history. She is otherwise functional class 1. What is the most appropriate initial starting dose of Thyroxin?
    a. 25 microgram
    b. 50 microgram
    c. 75 microgram
    d. 100 microgram
30. A 30 years old woman presents with features of Hypothyroidism and her TSH comes > 100 IU and FT4 less than normal. She has an insignificant past medical and surgical history. What is the most appropriate initial starting dose of Thyroxin?
    a. 25 microgram
    b. 50 microgram
    c. 75 microgram
    d. 100 microgram
31. A 60 years old woman has been on Thyroxin 50 microgram since last two years and her recent TSH is 20 IU. You have increased the dose of Thyroxin. When will you check the TSH to see response?
    a. 2 weeks
    b. 4 weeks
    c. 6 weeks
    d. 8 weeks

e. 12 weeks

32. A patient of 42 years presents with 5 days history of malaise, fever and painful thyroid. He had respiratory tract infection 2 weeks ago. His thyroid is enlarged and tender. He has palpitation, sweating, tremors. His pulse is 130 /min. What is your most appropriate treatment?
    a. Carbimazole
    b. Co-amoxiclave
    c. Diclofenac
    d. Propylthiouracil
    e. Thyroxin
33. You want to develop a screening program for hypothyroidism. Which patients you will NOT include in screening?
    a. Hypercholesterolemia
    b. Infertility
    c. Depression
    d. Multiple sclerosis
    e. Other Autoimmune Diseases.
34. A pregnant woman comes with palpitation, excessive sweating, heat intolerance and emotional liability. She is losing weight despite increased appetite. Her TSH is 0.2 mIU/L (0.4 – 5.0) and T4 is 28 pmole/L (8 – 22).What is the single most appropriate treatment?
    a. Carbimazole
    b. Thyroidectomy
    c. Propylthiouracil
    d. Ablative therapy
    e. Wait till delivery
35. A 34 years old man comes with 5 months history of headache. He has difficulty in driving because he cannot see sideways traffic. He also says that his wedding ring is not fitting in his finger any more. What is the single most appropriate specific diagnostic test for him?
    a. CT scan brain
    b. MRI brain
    c. Carotid Artery Doppler
    d. Thyroid function tests
    e. Fasting blood sugar
36. A 30 years old female presents with moon shaped face, buffalo hump and truncal obesity. Her physical exam shows increased blood pressure, easy bruising, acne and hirsutisun. What is the single most appropriate initial test for her condition?
    a. Dexamethasone suppression test
    b. Serum Cortisol level
    c. 24 hour urine Cortisol
    d. Serum ACTH level
    e. Urinary catecholamine
37. A 30 years old female presents with moon shaped face, buffalo hump and truncal obesity. Her physical exam shows increased blood pressure, easy bruising, acne and hirsutisun. Her Dexamethasone Suppression Test shows Cortisol ≥50mmol/L. What is the single most appropriate next test for her condition?
    a. Dexamethasone suppression test
    b. Serum Cortisol level
    c. ACTH level and 24 hour urine Cortisol
    d. Serum ACTH level

e. Urinary catecholamine

38. A 45 year old female presents to her GP with a two month history of lethargy. Blood tests reveal the following:
    - Na+ 128 mmol/l
    - K+ 5.6 mmol/l
    - Urea 5.3 mmol/l
    - Creatinine 99 µmol/l
    - Total T4 66 nmol/l (70 - 140 nmol/l)

Which one of the following investigations is most likely to reveal the diagnosis?

a. Serum glucose
b. TSH
c. Free T4
d. Overnight Dexamethasone suppression test
e. Short Synacthen test

39. 26 year old female presented in OPD with painless swelling in neck for 2 days. There is an h/o palpitation and sweating. She delivered a male baby 3 months back. There was no H/o thyroid disorder in the past. No h/o fever. TSH = 0.001 mIU, Free T4= 16.5 mIU. What is the most relevant prognostic test?

a. TSH receptor antibodies
b. Thyroid Peroxidase antibodies
c. Size of thyroid gland
d. Low TSH level

CARDIOLOGY PRE SESSION

1. A 65-year-old male comes to you with a blood test report showing Triglycerides of 540 mg/dl. His LDL is 160 mg/dl. He is not diabetic. Which initial treatment would you commence to reduce these levels?

a. Atorvastatin 20 mg
b. Atorvastatin 80 mg
c. Gemfibrozil 600 mg
d. Rosuvastatin 20 mg
e. Simvastatin 80 mg

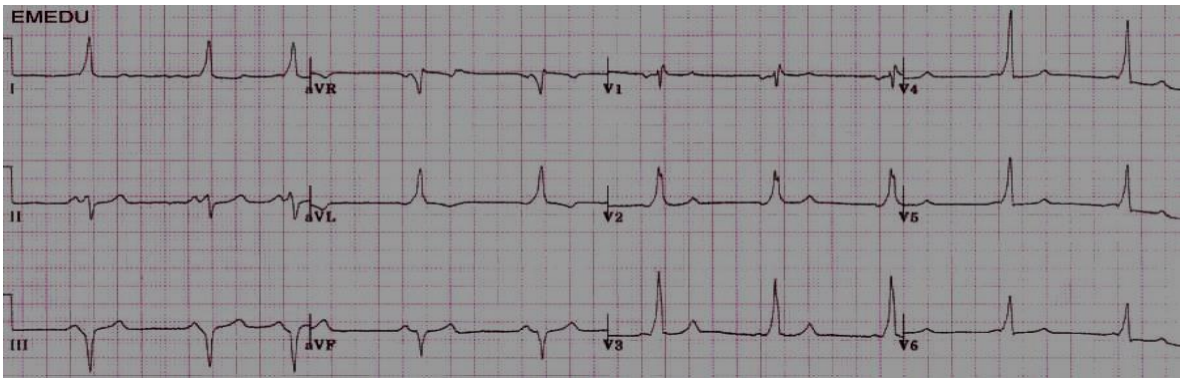
2. A 45-year-old man presents with a non-specific chest pain and some neck discomfort on exertion since last one hour and his ECG is normal. His father and paternal uncle had died suddenly at 48 and 50 years of age respectively. He is not diabetic. What would be your next step in management?

a. Reassure and discharge
b. Recall after blood tests
c. Refer for Exercise Tolerance Test
d. Refer to A/E immediately
e. Refer to cardiologist routinely

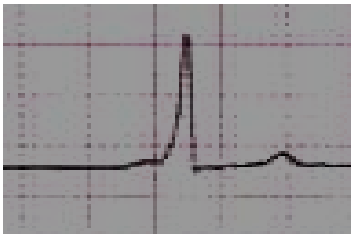
3. A 55-year-old female presents with a feeling of epigastric discomfort after eating for the second time today. She had a similar episode after a heavy meal last month and took some Gaviscon. She also felt she was sweating and pale for a few minutes. The pain has improved but is still there after two hours. Her pulse is 70/min and BP is 145/85. Her O2 saturation is 98% on air. She still looks a little pale. What is the single most appropriate initial investigation in a GP clinic?
    a. Abdominal USS
    b. Echocardiography
    c. Electrocardiography
    d. Upper GI Endoscopy
    e. H Pylori testing

4. A 67-year-old man with Diabetes Type2 presents to you to ask if he should be on Aspirin due to his Diabetes. What is the current recommendation?
    a. To commence Aspirin 75mg if his CVS risk is more than 20%
    b. To commence Aspirin 300mg if his CVS risk is more than 20%
    c. To commence Aspirin if there is a significant FH of CVD
    d. Not to commence aspirin as there the risk benefit ratio is not favorable
    e. Not to commence Aspirin if there is a H/O GI disorder or Reye's syndrome

5. A 56-year-old presents with an episode of palpitations which lasts for a period of ten to fifteen minutes and then subsides. She is getting the symptoms every day 2-3 times. She gets slightly short of breath and sweaty during the episode. Her ECG done twice turned out normal. Which would be the investigation of choice for diagnosing this patient?
    a. Echocardiography
    b. Exercise Tolerance Test
    c. Holter monitoring
    d. Thallium scan
    e. Tilt test
6. A 25 years old university student complains of palpitations off and on. He also complains of tremors, lack of sleep and decreased memory. His annual university examination is also coming up soon. His ECG is given below. What is the most appropriate definitive treatment in an ideal situation?

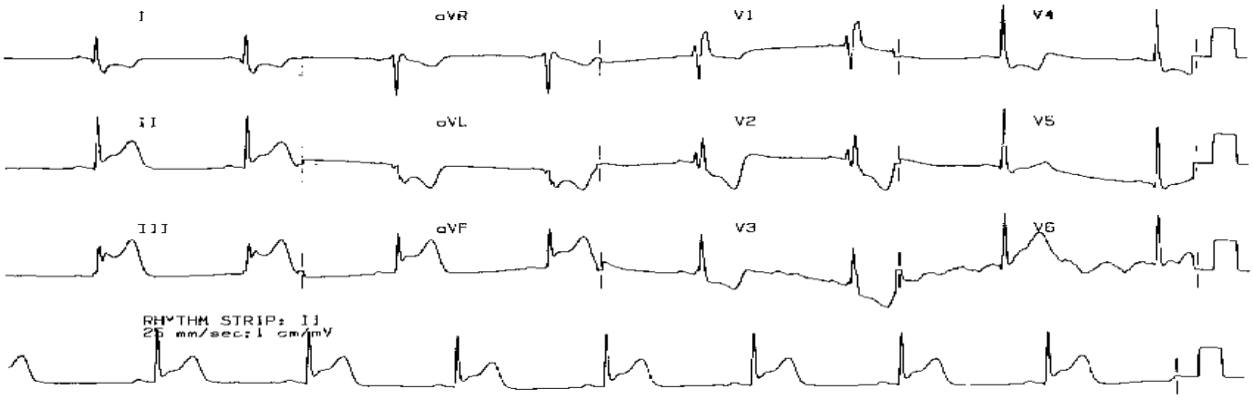


A. Exercise tolerance test
B. Holter monitoring
C. Laser ablation
D. On demand Pace maker
E. **Propranolol**



7. A 40 years man presents with blood pressure of 150/90 mm Hg. His fasting blood sugar is 98 mg/dl and cholesterol is 160 mg/dl. What is the most appropriate initial antihypertensive for him according to NICE guidelines?
   A. Amlodipine
   B. **Lisinopril**
   C. Hydrochlorthiazide
   D. Valsartan
   E. Labetalol

8. A 45 years man has been brought into your clinic by relatives saying he was watching TV and suddenly started chest pain. His pulse is 90 beats per min and BP is 140 / 90 mm Hg. His ECG which shows:



What is the most likely diagnosis?

A. Anterior wall MI
B. Anteroseptal MI

C. Inferior wall MI
D. Lateral wall MI
E. Posterior wall MI

9. A 45 years old woman, who is your old patient of asthma, develops hypertension and palpitations. Her pulse is 110 per minute and BP is 150/90 mm Hg. Her initial work up is unremarkable. Which one medicine would choose for her palpitations?
   A. Thiazide
   B. Verapamil
   C. Atenolol
   D. Lisinopril
   E. Felodipine

10. One of your neighbors has been coming to your home for BP monitoring. He smokes 10 cigarettes per day and his family history is also positive for ischemic heart disease. He has normal blood sugar and lipids. What will be the target BP for him according to JNC 8 guidelines?
   A. 120/80 mmHg
   B. 130/80 mmHg
   C. 130/90 mmHg
   D. 135/85 mmHg
   E. 140/90 mmHg

11. One of your neighbors has been coming to your home for BP monitoring. He smokes 10 cigarettes per day and his family history is also positive for ischemic heart disease. He has normal blood sugar and lipids. What will be the target BP for him according to NICE guidelines?
   A. 120/80 mmHg
   B. 130/80 mmHg
   C. 130/90 mmHg
   D. 135/85 mmHg
   E. 140/90 mmHg

12. Your colleague has referred a 45 years old hypertensive patient to you for control of BP. She has had HTN for 15 years. Her creatinine is 2.5 mg/dl and proteinuria is present. She does not have diabetes or dyslipidemia. What is the BP target for her according to JNC 8 guidelines?
   A. 120/80 mmHg
   B. 130/80 mmHg
   C. 130/90 mmHg
   D. 140/80 mmHg
   E. 140/90 mmHg

13. A 65 years old man presents in your clinic with complaint of dyspnea and nocturnal cough. His pulse is 98/min and BP is 165/95. He has crackles in the chest. Which one of the following initial investigations will best exclude heart failure?
    A. Electrocardiogram
    B. Echocardiogram
    C. Troponin T
    D. Chest X-ray
    E. Thallium scan

14. A 65 years old man presents in your clinic with complaint of dyspnea and nocturnal cough. His pulse is 98/min and BP is 165/95. He has crackles in the chest. Which one of the following initial investigations will best exclude heart failure according to NICE guidelines?
    A. ANP
    B. BNP
    C. **NT-proBNP**
    D. Pulse Oxymetry
    E. Trponin I

15. A 29 year old businessman comes to your clinic with his lipid profile which he got done after sudden death of his cousin. His weight is 68 Kg. He loves fatty food. His labs show:

    Total Cholesterol = 290 mg/dl

    LDL Cholesterol = 230 mg/dl

    HDL Cholesterol = 50 mg/dl

    Triglycerides = 540 mg/dl

    Total lipids = 1600 mg/dl

What could be the single most likely cause of his lipid profile?

    A. Overweight
    B. Work stress
    C. Sedentary life style
    D. Genetic predisposition
    E. High fat diet

16. 40 years old man is found to have Triglyceride level of 650 mg/dl and Cholesterol level of 180 mg/dl. He does not have risk factors for coronary artery disease. What is the initial first line drug of choice for him at this stage?
    A. Atorvastatin
    B. Ezitimibe

C. Gemfibrozil
D. Nicotinic acid
E. Simvastatin

17. A 60 years old hypertensive brings his reports showing Cholesterol level of 250 mg/dl and Triglyceride of 320 mg/dl. Previously his lipids were in normal range. His blood pressure is well controlled on monotherapy. Which one of the following drugs he might be taking?
    A. Atenolol
    B. Diltiazem
    C. Lisinopril
    D. Losartan
    E. Nifedipine

18. A 50 years old hypertensive patient comes to your clinic for neck pain. He is taking Amlodipine 5 mg daily since last one year. His BP twice in your clinic is 190/110 mm Hg. He denies chest pain, shortness of breath, blurring of vision, or weakness in any part of body. His ECG and fundscopy are normal. What is the single most appropriate treatment option at this stage according to NICE guidelines?
    A. Amlodipine 10 mg + Lisinopril 10 mg
    B. Labetalol
    C. Lasix 80 mg IV
    D. Sodium Nitroprusside
    E. Sublingual Captopril

19. A 50 years old man wishes to fly to Paris from Karachi to see his children. He had an acute MI one week ago and was discharged from the hospital without any complication. He is taking his medicines regularly. After how many weeks after MI will you allow him to travel by air to Paris?
    A. 1 week
    B. 2 weeks
    C. 4 weeks
    D. 6 weeks
    E. 8 weeks

20. A 54 year old man presents to your clinic four weeks after myocardial infarction. He is complaining of chest pain, fever, and multiple joint pains. Laboratory tests do not show an increase in cardiac enzymes. What is the most likely diagnosis?
    A. Costochondritis
    B. Dressler's syndrome
    C. Pneumonia
    D. Post MI angina

E. Pericarditis

21. A 30 years old male presents with pain at left 7th rib which is enhanced by coughing and sneezing. There is marked localized tenderness at left 7th rib's costochondral junction. What is the single most likely diagnosis?
    A. Dressler's syndrome
    B. Fractured rib
    C. Myocarditis
    D. Pericarditis
    E. Tietze syndrome

22. A 60 year old man presents with cholesterol of 250 mg/dl and triglycerides of 240 mg/dl. His blood pressure is 168/90 mm Hg. He has a previous history of TIA. What is most appropriate *dose* of Atorvastatin as secondary prevention in order to reduce overall mortality from atherosclerotic disease according to NICE guidelines?
    A. 5 mg
    B. 10 mg
    C. 20 mg
    D. 40 mg
    E. 80 mg

23. A 56 year old diabetic man has come to your clinic for control of blood sugar. His blood sugar is 140 mg/dl after meals. He smokes 10 cigarettes per day and also walks for 30 minutes every day. His family history is negative for Coronary Artery Disease. His total cholesterol is 175 mg/dl. What would be the goal LDL level for him?
    A. < 100 mg/dl
    B. < 110 mg/dl
    C. < 130 mg/dl
    D. < 160 mg/dl
    E. < 180 mg/dl

24. A 56 year old diabetic man has come to your clinic for control of blood sugar. His blood sugar is 140 mg/dl after meals. He smokes 10 cigarettes per day and also walks for 30 minutes every day. His family history is negative for Coronary Artery Disease. His total cholesterol is 175 mg/dl. What is the recommended dose of Atorvastatin according to NICE guidelines for him?
    A. 5 mg
    B. 10 mg
    C. 20 mg
    D. 40 mg
    E. 80 mg

25. A 54 years old housewife discusses her lipid profile with you. Her total cholesterol is 226 mg/dl and HDL is 62 mg/dl. She does not smoke. Her blood sugar is 100 in fasting. Her BP is 138/88 mm Hg. Her brother died at the age of 46 years due of acute myocardial infarction. What is the recommended dose of Atorvastatin according to NICE guidelines for him?
    A. 10 mg
    B. 20 mg
    C. 40 mg
    D. 80 mg
    E. None

26. A 56 years old housewife discusses her lipid profile with you. Her total cholesterol is 236 mg/dl and HDL is 62 mg/dl. She does not smoke. Her blood sugar is 100 in fasting. Her BP is 138/88 mm Hg. Her brother died at the age of 46 years due of acute myocardial infarction. What should be the target LDL goal for her?
    A. < 100 mg/dl
    B. < 110 mg/dl
    C. < 130 mg/dl
    D. < 160 mg/dl
    E. < 180 mg/dl

27. A 42 years old patient of Mitral Stenosis comes to your clinic. She does not have history of diabetes and hypertension. Her RBS is 130 mg/dl and BP is 130/90 mm Hg. Her family history is unremarkable. What should be her goal LDL level?
    A. <100 mg/dl
    B. < 110 mg/dl
    C. < 130 mg/dl
    D. < 160 mg/dl
    E. < 180 mg/dl

28. A 65 years old man with diabetes and hypertension complaints of chest pain on exertion. He has loud injection systolic murmur. His ECG shows Left Bundle Brach Block (LBBB) what is the most appropriate initial diagnostic test for his chest pain?
    A. Angiography
    B. Cardiac Enzymes
    C. Echocardiogram
    D. Exercise ECG (ETT)
    E. Stress echocardiogram

29. A 35-year-old housewife presents with tiredness and lethargy and weight gain for the last three months. She complains of poor sleep and is day time sleepiness. Her husband

reports that she snores a lot. Her BMI is 32 and her neck circumference is 17". What is the likely diagnosis?

a. Diabetes Mellitus Type2
b. GERD
c. Hypothyroidism
d. Obesity
e. Obstructive sleep apnea

30. A 40 year old man comes after a minor road traffic accident which happened because he fell asleep during driving. He also falls asleep during meetings and social gatherings. His concentration is poor and his sexual drive is decreased. What is the most appropriate management step?

A. Sildenafil
B. Sertraline
C. Benzodiazepine
D. Mirtzapine
E. CPAP therapy

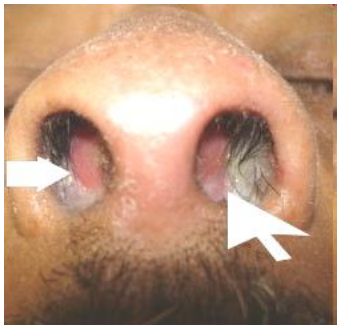
ENT

Post session

MCPS-MRCGP Course

1. A 45 years old chronic beetle nut eater presents with difficulty in opening his mouth since 6 months. The oral mucosa is thick, dull and white all over. What is the most likely diagnosis?
   a. Leukoplakia
   b. Mucosal atrophy
   c. Oral Thrush
   d. Scleroderma
   e. Sub mucous fibrosis
2. A 9 years old boy presents to your clinic with fever, throat pain, drooling and restlessness. There is an audible husky inspiratory sound. How would you manage this patient?
   a. Examine throat for membrane
   b. Insert oral airway
   c. IV hydrocortisone
   d. Referral for admission
   e. Salbutamol nebulizer

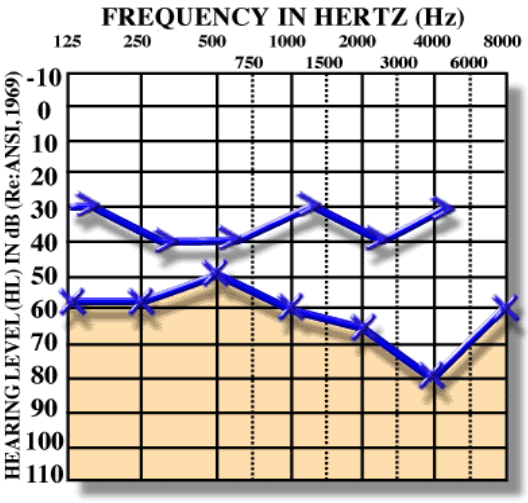
3. A 3 year old with foul-smelling bloody discharge from right nostril since 4 weeks. What is the most likely diagnosis?
    a. Adenoidal Hypertrophy
    b. Atrophic rhinitis
    c. Foreign body in nose
    d. Fungal sinusitis
    e. Right nasal polyp
4. A 29 year old rugby player who has been hit on the nose and is now complaining of bilateral nasal obstruction. There is bright red midline swelling visible from both nostrils obstructing nasal passage. What is the single most appropriate management step?



    a. Cold compression
    b. Decongestant
    c. Evacuation
    d. Needle aspiration
    e. Steroid spray
5. A 43 year old woman is suffering from chronic nasal obstruction and discharge. She has used over the counter nasal sprays for months and feels that the problem is worsening.
    a. Atrophic rhinitis
    b. Fungal sinusitis
    c. Nasopharyngeal carcinoma
    d. Rhinitis medicamentosa
    e. Septal haematoma
6. A 30 year old man presents with a 2-days history of malaise, fever, bad oral smell, painful swallowing and inability to open mouth. There is bulge in left side of pharynx shifting uvula to right side. What is the single most likely diagnosis?
    a. Acute pharyngitis
    b. Acute Tonsillitis
    c. **Peritonsillar abscess**
    d. Pharyngeal abscess
    e. Vincent's angina
7. A 7 year old boy presents with a 10 day history of malaise, low grade fever and a painful discharging ear. There is tenderness behind right ear and you are unable to visualize his tympanic membrane. What is the most likely diagnosis?
    a. Boil in ear
    b. Fungal infection
    c. Mastoiditis
    d. Otitis externa
    e. Otitis media
8. A 6 year old girl presents to you with bilateral ear discharge. He mother tells you that she keeps her mouth open all the time. Her weight is 16 KG. Which single investigation would you order to confirm your diagnosis?
    a. Complete Blood Count

b. Culture of ear discharge
c. Throat swab for culture
d. **X ray of nasopharynx**
e. X-ray paranasal sinuses

9. A 45 years old woman presents with episodic history of dizziness, ringing in ears, earache and progressive sensorineural deafness since three years. What is the most likely diagnosis?
    a. Benign Positional vertigo
    b. Otosclerosis
    c. Menniere's disease
    d. Basilar insufficiency
    e. Acoustic neuroma
10. A 40 years old woman presents with episodic history of dizziness, ringing in ears, earache and progressive sensorineural deafness since three years. What is the single most appropriate long term drug therapy for this condition?
    a. Frosamide
    b. Indapamide
    c. Mannitol
    d. Spironolactone
    e. Thiazide
11. A 35 years old man has come to your clinic with hearing loss in right ear since two weeks. His audiogram is shown here. What is the single most likely cause according to his audiogram?



    a. Acoustic neuroma
    b. Labrynthitis
    c. Menniere's disease
    d. Otitis media
    e. Presbycusis
12. A 39 year old female presents with a four days history of dizziness. The dizziness is associated with nausea and vomiting. There is NO hearing loss, tinnitus or ear pain. The patient has just recovered from an upper-respiratory tract infection. Nystagmus and ataxia are present. What is the most likely diagnosis in this patient?
    a. Acute labyrinthitis
    b. Benign positional vertigo
    c. Meniere's disease
    d. Orthostatic hypotension
    e. Vestibular neuronitis
13. A 26 year old female presents with six days history of severe dizziness associated with ataxia and right ear heaviness and mild deafness. She had an upper-respiratory tract infection 1 week ago. Nystagmus and ataxia are present. What is the most likely diagnosis in this patient?
    a. Acute labyrinthitis
    b. Acute Otitis media
    c. Benign positional vertigo

d. Menniere's disease
e. Vestibular neuronitis

14. A 45 years old man presents with gradual bilateral hearing loss since last 7 months. There is no history of ear discharge or tinnitus. His tympanic membranes appear normal. Rennie's is negative on both sides and Weber is central. What is the most likely cause?
    a. Acoustic neuroma
    b. Labrynthitis
    c. Meniere's disease
    d. Otosclerosis
    e. Presbycusis
15. A 42 years old man present with 103^{o} fever, runny nose, right sided severe facial pain which is more on bending forwards since last 3 days. His right maxillary bone is tender. What is single most appropriate drug for him?
    a. Amoxicillin
    b. Cefuroxime
    c. Ciprofloxacin
    d. Cotrimoxazole
    e. Doxycycline
16. A 48 year old man complains of hearing loss, tinnitus in the right ear, and vertigo for the past 3 months. He has facial palsy on the right side. Which of the following is the most likely diagnosis?
    a. Acoustic neuroma
    b. Basilar insufficiency
    c. Horner's syndrome
    d. Ramsay Hunt syndrome
    e. Right sided Bell palsy
17. A 5 years old boy has been brought by mother complaining of mild pain in right ear since last one week. The child is otherwise active. On examination the right tympanic membrane is dull, mildly hyperemic, slightly bulging and he has 101 ^{o} F fever. What is the most appropriate management step?
    a. Amoxicillin
    b. Audiometry
    c. Citrizine
    d. Paracetamol
    e. X-ray nasopharynx
18. A 48 year man presents with long standing sore throat since last two years. He has used multiple antibiotics and antihistamines but to no avail. His symptoms are worst in the morning. His voice is also slightly hoarse in the morning. His weight is 110 Kg. What should be the most approach to his treatment at this stage?
    a. Antibiotic prophylaxis
    b. Refer for tonsillectomy
    c. Treat for allergies
    d. Treat for postnasal drip
    e. Treat for reflux disease

19. A 4 years old girl presents with fever, sore throat and maculopapular rash on truck for the last two days. Her tongue has prominent papillae and is hyperemic. Her tonsils are inflamed and enlarged. What is the single most appropriate therapy for this child?
    a. Acyclovir
    b. Amoxicillin
    c. Cotrimoxazole
    d. Erythromycin
    e. Prednisolone
20. A 6 years old boy presents with fever, anorexia and neck swellings since last three months. On examination, he is pale, has bilateral cervical and axillary lymph nodes and edge of liver is palpable. What is the single most appropriate initial investigation for this child?
    a. Bone marrow aspirate
    b. CBC with peripheral film
    c. FNAC of lymph node
    d. Lymph node biopsy
    e. Ultrasound neck

NEUROLOGY PRE SESSION

1. A 60 year old man presents to your clinic with weakness, fatigue, numbness of hands and feet and dizziness. He had Laparotomy and ileo-colic anastomosis 5 years ago for intestinal perforation. He has positive Romberg sign. His labs show

Hb	11 g/dl
MCV	↑ (Normal range: 80-96fl/red cell count)
MCH	N (Normal range: 27-33pg/cell)
MCHC	N(Normal Range: 33-36g/dL)
FBS	100 g/dl
TSH	2.7 (Normal Range: 0.3-5.0Mu/L)

What is the most likely diagnosis?

A. Age related nerve degeneration
B. Multiple sclerosis
C. Myasthenia Gravis
D. Tuberous sclerosis
E. **Vitamin B 12 deficiency**

2. A 14 year old boy has been brought to your clinic by parents saying that he has had 5 episodes of unconsciousness with jerky movements in the past 2 months. His health otherwise is fine in between the episodes. You ordered an EEG which is completely normal. What would you tell the parents?

A. He needs CSF analysis
B. He needs CT scan brain
C. Repeat EEG after next episode
D. There is no epilepsy
E. **You cannot rule out epilepsy**

3. A 30 years old male comes with fever, vomiting and lethargy for 48 hours. He has headache and stiffness of neck. His pulse 120/min, BP= 90/60mm Hg, temp=103 F°. What would be the single most appropriate initial step in management in a GP clinic?

A. Ampicillin
B. Benzyl penicillin
C. **Ceftriaxone**
D. Chloramphenicol
E. Vancomycin

4. 50 years old woman presents to your clinic with headache for 4 weeks. She also has mild fever since 4 weeks. The headache is dull, continuous, worsened by coughing, straining and present all around the scalp. She has also lost weight. She has diabetes since 8 years. What is the most likely diagnosis?

A. Brain tumor
B. Chronic daily headache
C. Encephalitis
D. **TB Meningitis**

E. Viral meningitis

5. Which one of the following treatments should be given to patients with acute ischemic stroke to improve long-term functional outcome and survival?

A. **Aspirin**
B. Clopidogril
C. Enoxaparin
D. Heparin
E. Warfarin

6. Which one of the following Tricyclic antidepressants is considered first-line therapy for migraine prophylaxis?

A. **Amitriptyline**
B. Clomipramine
C. Imipramine
D. Nortriptyline
E. Trimipramine

7. A 35 years man presents with episodes of brief loss of consciousness and fall. Before he falls down he feels nausea, suffocation and sweating. He denies jerky movements or incontinence. Which one of the following tests is the single best **initial** investigation in a GP setting?

A. 24-hour Holter monitoring
B. Echocardiography
C. **Electrocardiography**
D. Electroencephalograph
E. Head-up tilt-table testing

8. 28 years old female comes with complain of headache for the last six months. The headache occurs five times in a week. She denies fever or weight loss. Headache mostly occurs in the day time especially in the evening. There is no vomiting. He occassionbally takes medicines for headache. What will you tell her regarding her duration of headache?

A. **Chronic daily headache**
B. Chronic migraine
C. Cluster headache
D. Medication overuse headache
E. Raised intracranial pressure

9. A 34 year old businessman comes with headache for 4 months lasting 30 min. It is pressing, tightening in nature. Not effecting daily activities and nor aggravated by routine

physical activities. He works 16 hours/day. He has to take Ibuprufen for pain 3 times per day. What will you tell him regarding type of headache?

A. Chronic daily headache
B. Chronic migraine
C. Cluster headache
D. **Medication overuse headache**
E. Raised intracranial pressure

10. A 35 years old asthmatic woman comes with headache and photophobia for 6 weeks. Her headache is thrice a week. She reports changes in vision before the headache. Her headache is relieved by sleep. What will you prescribe her to **prevent** headache?

A. **Amitriptyline**
B. Propranolol
C. Valproate
D. Verapamil
E. Zolmitryptan

11. A 28 year old medical student comes with headache, pain around left eye, tearing of left eye and runny nose for 4 weeks. Pain last up to 40 min and occurs once daily. He noticed pain starts 1 ½ hrs after he uses alcohol. What is the single most appropriate initial treatment for his headache?

A. Diclofenac
B. Lithium
C. **Oxygen**
D. Paracetamol
E. Verapamil

12. A 28 year old medical student comes with headache, pain around left eye, tearing of left eye and runny nose for 4 weeks. Pain last up to 40 min and occurs once daily. He noticed pain starts 1 ½ hrs after he uses alcohol. What is the single most appropriate prophylactic treatment for his headache?

A. Amitriptyline
B. Propranolol
C. Valproate
D. **Verapamil**
E. Zolmitryptan

13. A 21 year old university student comes with complain of headache for 2 months. The pain is pulsating in nature, aggravated by his daily chores and affecting his studies. He has 6

attacks/month lasting usually 5 ½ hrs. His headache starts suddenly. What is the single most appropriate diagnosis?

A. Chronic migraine
B. Complicated migraine
C. Migraine with aura
D. **Migraine without aura**
E. Secondary headache

14. Patients with chronic daily headaches most commonly have a history of which one of the following types of episodic headache?

A. Cluster headache
B. Eye-strain headache
C. Migraine headache
D. Sinus headache
E. **Tension-type headache**

15. A 43 year old man presents with disturbed sleep because he keeps on moving his legs all the night. Which of the following is the medication of choice for his condition?

A. Amitriptyline
B. Clonazepam
C. Gabapentin
D. Quinine
E. Ropinirole

16. A 33 years old female comes with history of migraine. She is taking Paracetamol + Domperidone for treatment. She has 2 attack / month. She wants medicines for the prophylaxis of attacks. What will you advise her regarding further management?

A. Amitriptyline
B. **Paracetamol**
C. Pizotifen
D. Propranolol
E. Sodium valproate

17. A 42 years old man complains of brief episodes of sharp current like lancinating pain on right side of his face. Pain may be precipitated by chewing. Physical exam is normal. The drug of choice for this patient is:

A. **Carbamazepine**

B. Gabapentin
C. Naproxen
D. Prednisone
E. Valporic acid

18. A mother comes to your office with her 12-year-old daughter stating that for the past 6 months she frequently has noted the child staring into space. This lack of concentration usually lasts only 30 to 45 seconds. The child's neurologic examination is normal. What is the drug of choice for her problem?
    A. Carbamezapine
    B. **Ethosuxamide**
    C. Gabapentin
    D. Topiramate
    E. Valproic acid

19. A 62 year old diabetic presents with tingling in his feet for the last one year. What is the drug of choice for his condition according to NICE guideline?
    A. Amitriptyline
    B. Carbamezapine
    C. Duloxetine
    D. Gabapentin
    E. Pregabalin

20. A 55 old lady comes to you with headache for 3 weeks; she says she had nausea & fever and pains in proximal arms & legs. On examination she is tender over scalp particularly on superior-lateral sides of both eyes. What is the diagnosis?
    A. Migraine
    B. Sinusitis
    C. Space Occupying Lesion
    D. TB meningitis
    E. **Temporal arteritis**

MENTAL HEALTH

1. A 46 year old lawyer reports that he has not been sleeping well for the last one week. He also complains of feeling very low, irritable, restless, and unable to concentrate. He quit smoking a few days back when a colleague of his, who was also a heavy smoker died of a heart attack. What is the single most appropriate diagnosis?
   A. Acute Stress
   B. Adjustment Disorder
   C. Generalized Anxiety
   D. Panic Disorder
   E. Post-Traumatic Stress Disorder

2. A 51 year old man was apprehended by the police on the charges of domestic violence. He stated that his wife was being unfaithful, and, although, he had not yet found evidence to support his contention, he was convinced that this to be 100 % true. What is the single most appropriate diagnosis?
   A. Confabulation
   B. Hallucination
   C. Manic Disorder
   D. Paranoid Delusion
   E. Schizophrenia

3. A 17 year old girl is referred for evaluation after taking an overdose of sleeping pills. Her mother reports that during the last couple of months the girl had been very upset, crying frequently, missing classes, and avoiding friends. The girl believes herself to be of no good, as her two sisters get all the attention because of their good grades at the school. What is the single most appropriate diagnosis?
   A. Attention seeking
   B. Depression
   C. Dysthymia
   D. Factitious Disorder
   E. Schizophrenia

4. A 58 year old man, whose wife died a year back, experiences elements of acute grief, crying, sobbing, and sighing every time he hears her name or sees her picture. What is the single most appropriate diagnosis?
   A. Adjustment Disorder
   B. Depression
   C. Normal grief
   D. Post-Traumatic Stress Disorder
   E. Prolonged Grief

5. You have been asked to see a mother whose son died in an accident this morning. The family thinks that she is not her normal self and is unusually calm and detached in this moment of grief. What is the single most appropriate diagnosis?
   A. Acute Stress Disorder
   B. Adjustment Disorder
   C. Depression
   D. Dysthymia
   E. Grief reaction
6. A 16 year old boy is brought to the emergency after he slashed his forearm with a razor blade. He is very upset since he has been continuously reprimanded by his father for his failure in the high school exam one month ago. He has been an average student, and has usually been a carefree lad. What is the single most appropriate diagnosis?
   A. Acute Depression
   B. Acute Psychosis
   C. Acute Stress
   D. Adjustment Disorder
   E. Bereavement
7. A 28 year old, mother of two children, complains of her lack of sleep, in spite of feeling tired and fatigued. She has become very irritable and has often been to her GP for aches and pains. She says that she can no longer handle even a trivial stress like an ordinary illness of her children, which makes her excessively worried. What is the single most appropriate diagnosis?
   A. Conversion Reaction
   B. Hypochondriasis
   C. Obsessive Compulsive Disorder
   D. Malingering
   E. Somatization Disorder
8. A 40 year old salesman is brought to the emergency with his hands on his chest and pleading to the doctor to do something and to give him oxygen. He thinks he has a heart attack. The family reports that they have been to the emergency many times in the past one year in a similar state. His ECG and labs were normal on all three occasions. This all started when one of his colleagues had a heart attack from which he never survived. What is the single most appropriate diagnosis?
   A. Conversion Reaction
   B. Hypochondriasis
   C. Obsessive Compulsive Disorder
   D. Malingering
   E. Somatization Disorder
9. A 30 year old school teacher asks for a medical certificate as he has not been attending school for the last one month. He is otherwise okay, but he is afraid of going out of the house alone. He would ask someone to accompany him. What is the single most appropriate diagnosis?
   A. Agoraphobia
   B. Claustrophobia

C. Generalized Anxiety disorder
D. Panic Disorder
E. Social phobia

10. A young man, 28 years, has come to you complaining of a lack of confidence. He says he has difficulty talking to people, as he starts babbling whenever he confronts a stranger. He is especially shy of moving around in the office because there are a lot of ladies working there, and he tries to avoid them. He is now worried because he is going to get married in six months and he has no experience in talking to ladies. What is the single most appropriate diagnosis?
    A. Agoraphobia
    B. Claustrophobia
    C. Gender identity Disorder
    D. Panic Disorder
    E. Social phobia
11. A mother of a 16 year old student comes for an advice regarding a very strange behavior in her daughter, who steps back and forth a number of times while passing through any door. She also spends a lot of time in bathroom washing her hands again and again. She has been otherwise a much disciplined, organized individual, very particular about her cleanliness. What is the single most appropriate diagnosis?
    A. Bipolar Disorder
    B. Chronic Adjustment Disorder
    C. Generalized Anxiety Disorder
    D. Obsessive Compulsive Disorder
    E. Schizoid Personality Disorder
12. A mother of a 12 year old boy is concerned that her son is unduly afraid of dogs. A couple of weeks beck he came rushing back home, when he saw a dog in the street. He is otherwise a happy kind of a kid and a good athlete, who loves going to school on his bike. His school grades have always been good. What is the single most appropriate diagnosis?
    A. Agoraphobia
    B. Claustrophobia
    C. Panic Disorder
    D. Phobia
    E. Social phobia
13. A 23 year old woman arrives at the emergency room complaining that, out of the blue, she had been seized by an overwhelming fear, associated with shortness of breath and a pounding heart. These symptoms lasted for approximately 20 minutes, and while she was experiencing them, she feared that she was dying or going crazy. The patient has had four similar episodes during the past month, and she has been worrying that they will continue to recur. What is the single most appropriate diagnosis?
    A. Agoraphobia
    B. Claustrophobia
    C. Generalized Anxiety disorder
    D. Panic Disorder

E. Social phobia

14. A 34 year old secretary climbs 12 flights of stairs every day to reach her office because she is terrified by the thought of being trapped in the elevator. She has never had any traumatic event occur in an elevator; nonetheless, she has been terrified of them since childhood. What is the single most appropriate diagnosis?
    A. Agoraphobia
    B. Claustrophobia
    C. Generalized Anxiety disorder
    D. Panic Disorder
    E. Social phobia
15. For several months, a 32 year old housewife has been unable to leave her house unaccompanied. When she tries to go out alone, she is overwhelmed by anxiety and fears that something terrible will happen to her and nobody will be there to help. What is the single most appropriate diagnosis?
    A. Agoraphobia
    B. Claustrophobia
    C. Generalized Anxiety disorder
    D. Social phobia
    E. Specific phobia
16. A 17 year old girl blushes, stammers, and feels completely foolish when one of her classmates or a teacher asks her a question. She sits at the back of the class hoping not to be noticed because she is convinced that the other students think she is unattractive and stupid. What is the single most appropriate diagnosis?
    A. Agoraphobia
    B. Mild depression
    C. Schizophrenia
    D. Social phobia
    E. Specific phobia
17. Two years after she was saved from her burning house, a 32 year old woman continues to be distressed by recurrent dreams and intrusive thoughts about the event. She has purchased a new home away from the previous area and often avoids any conversation regarding the incident; but still is unable to rid herself of these thoughts. What is the single most appropriate diagnosis?
    A. Adjustment Disorder
    B. Chronic Stress Disorder
    C. Claustrophobia
    D. Post-Traumatic Stress Disorder
    E. Social phobia
18. An 18 years old boy brought by parents with complaints that for last 6 months, he sees a fairy and wants to marry her. What will be the most appropriate diagnosis?
    A. Delirium
    B. Delusion
    C. Hallucination

D. Illusion
E. Paranoid

19. A 6 years old child has been brought to your clinic with complaints that he is unable to sit still and keeps moving all the time. He can't sit calmly for studies, taking meals, travelling in car. He looks here and there during the consultation.
    A. ADHD
    B. Adjustment Disorder
    C. Anxiety
    D. Autism
    E. Bipolar Disorder

20. A 9 years old boy has been brought by parents saying that he does not listen to teachers in school and does whatever pleases him. He draws strange lines and describes them as different objects. During consultation he was busy in writing with pen on your table making bizarre circles. What is the single most appropriate diagnosis?
    A. ADHD
    B. Anxiety
    C. Autism
    D. Bipolar Disorder
    E. Personality Disorder

21. A 32 year pregnant woman presents with low mood, loss of interest, weight loss, crying and anhedonia for the last 2 months. She is in her second trimester. What is the single most appropriate drug at this stage?
    A. Citalopram
    B. Escitalopram
    C. Fluoxetine
    D. Paroxetine
    E. Sertraline
22. A 28 year woman presents with low mood, loss of interest, weight loss, crying and anhedonia for the last 2 months. She gave birth to a baby boy two months ago and is breastfeeding her baby. What is the single most appropriate drug at this stage?
    A. Citalopram
    B. Escitalopram
    C. Fluoxetine
    D. Duloxetine
    E. Sertraline
23. A 42 years labourer presents with low mood, loss of interest, weight loss, crying and anhedonia for the last 6 months. He wakes up very early in the morning and is unable to carry out his daily labour work. What is the single most appropriate drug for his condition?
    A. Amitriptyline
    B. Bupropion
    C. Duloxetine

D. Fluoxetine
E. Mirtazapine

24. A 38 year old woman presents with insomnia for the last two months after she was started on Tab Sertraline. She is upset because she had insomnia even before the start of treatment and it simply worsened with the treatment. What is single most appropriate drug for her condition?
    A. Amitriptyline
    B. Clomipramine
    C. Dusalphin
    D. Imipramine
    E. Nortriptyline
25. A 48 year old man presents with erectile dysfunction for the last two months after he was started on Tab Escitalopram. He is upset because his wife has started doubting his loyalty. What is single most appropriate drug for his condition?
    A. Clomipramine
    B. Mirtazapine
    C. Risperidone
    D. Testosterone
    E. Valproic acid
26. A 28 years clerk presents with headache, lethargy, low mood and weight gain since last three months. He has difficulty in concentrating in his work and in the bad books of his boss. He has been given a warning letter. He has a big family to support. His RBS is 140 mg/dl and TSH is 2.4 IU (Normal 0.4 to 4.0 IU). What is the single best step in management?
    A. Antidepressants
    B. Anxiolytics
    C. Counselling
    D. Refer to psychiatrist
    E. Watchful waiting
27. A 45 years man has come to your clinic for insomnia. He lost his mother last week and has been having difficulty in falling asleep. He misses his mother and his eye tear very easily when he remembers her. He does not feel like going to work but goes to work daily. He has **not** lost interest in life and in interacting with people normally. What is the single most appropriate step for his sleep?
    A. Zolpidem
    B. Alprazolam
    C. Amitriptyline
    D. Paroxetine
    E. Risperidone
28. A 45 years man has come to your clinic for insomnia. He lost his mother last week. He wakes up at 2:00 am at night and cries till morning. He misses his mother and his eye tear very easily when he remembers her. He does not go to work and remains inside the house most of time. He has **lost** interest in life and in not interacting with people. What is the single most appropriate step in management?

A. Zolpidem
B. Alprazolam
C. Amitriptyline
D. Paroxetine
E. Risperidone

29. A 20 years medical student has been brought by the warden stating that he does not take his food properly and has lost a lot of weight. He keeps sleeping till late afternoon and misses classes. He is irritable and gets angry very soon. He had moved to hostel one month ago because his family moved to another city. What is the single most psychological treatment for him?
    A. Activity Planning
    B. Cognitive Behavioural therapy
    C. Desensitization Therapy
    D. Exposure Therapy
    E. Hypnosis

30. A 58 year old man presents with low mood, lack of interest, anorexia, and weight loss, insomnia after death of his wife and eldest son in a motorcycle accident two months ago. He has been found talking to the souls of the deceased family members and making beds for them as if they were present. He is convinced that they have gone to shopping and are on their way. What is the single most appropriate step in management?
    A. Antidepressants
    B. Anxiolytics
    C. Cognitive Behavioural Therapy
    D. Electro Convulsive Therapy
    E. Refer to psychiatrist
31. A 22 years old girl presents with worries, fears, tremors, palpitations, insomnia, light-headedness and reduced memory for the last one year. She is taking cap Fluoxetine 40 mg per day and Propranolol 10 mg twice a day since last two weeks and reports some improvement. What is the single most appropriate psychological therapy for her?
    A. Activity Planning
    B. Cognitive Behavioural therapy
    C. Desensitization Therapy
    D. Exposure Therapy
    E. Hypnosis
32. One of your patients of Generalized Anxiety Disorder has been coming to you again and again reporting minimal improvement in his condition with Escitalopram 40 mg per day and five sessions of CBT. What is the single most appropriate step in management according to NICE Guidelines?
    A. Sertraline
    B. Risperidone
    C. Nortriptyline
    D. Bupropion

E. Duloxetine

33. A 35 years female with Obsessive Compulsive Disorder has come for follow up after starting Paroxetine 20 mg HS. She is better and is able to resist washing her hands again and again but has difficulty in controlling her thoughts. She feels frustrated and often shouts and moans when the thoughts are coming and she is resisting them. What is the single most appropriate drug to stop her thoughts?
    A. Diazepam
    B. Pregabalin
    C. Lithium
    D. Risperidone
    E. Sodium valproate

34. A 42 years male was diagnosed to have Major Depressive Disorder and was started on Amitriptylin 6 weeks ago. Currently he is taking four tablets of Amitriptylin 25 mg at night and reports partial improvement. He has bearable side effects of Amitriptylin. What is the single most appropriate step in management at this stage?
    A. Add SSRI
    B. Add Valproic acid
    C. Change to SSRI
    D. Continue same
    E. Increase Amitriptyline

35. A 30 years housewife was started on Sertraline 50 mg OD last week for her Generalized Anxiety Disorder. She reports back that her anxiety had increased with Sertraline. What is the single most appropriate step in management?
    A. Alprazolam
    B. Haloperidol
    C. Nortriptyline
    D. Risperidone
    E. Sodium valproate

36. A 36 years shopkeeper has been diagnosed as Generalized Anxiety Disorder and has been put on Paroxetine 20 mg OD and Propranolol 20 mg BD since last two months. He remains well but gets angry very soon and his anger gets out of control. When he realizes his unpleasant behaviour, he cries and begs for forgiveness. He also becomes nervous when many customers come into his shop. What is the single most appropriate drug for his mood?
    A. Alprazolam
    B. Haloperidol
    C. Nortriptyline
    D. Risperidone
    E. Valproate

37. A 19 years old girl has been brought by mother because she has been found to eat chalk, paint, clay and paper. Her parents have forbidden her many times but she can't resist. On

examination she has soft nails which are flat and her tongue is reddish and shiny. What is the single most appropriate drug for her condition?

A. Ascorbic Acid
B. Calcium Gluconate
C. Ferrous sulphate
D. Pyridoxine
E. Vitamin B12

38. A 55 year old retired soldier presents with flashbacks, episodes of anxiety and depression when he thinks of previous combats he was involved in, especially where innocent civilians were killed. What is the single most appropriate psychological therapy for him?

A. Aversive Therapy
B. Demoralization
C. Depersonalization
D. Desensitization
E. Psychoanalysis

39. A 58 years old man, severely depressed, has not responded to any antidepressant medicines. He is also having suicidal ideas off and on. What will be your next management plan for depression?

A. Benzodiazepines
B. Electroconvulsive therapy
C. Lithium
D. Olanzapine
E. Psychotherapy

40. 45 years old man brought by relatives with complains that for last 4 months he has been saying that he is messenger of God. He sleeps less and eats large amount of food. He tries to speek in front of people as preacher. He resists medical check-up. What will be the most appropriate management?

A. Chlorpromazine
B. Diazepam
C. Lithium
D. Risperidone
E. Sodium valproate